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ABSTRACT

The document presents an international directory of mental retardation resources. International organizations pertaining to the mentally retarded are listed and described, including those affiliated with the United Nations, intergovernmental agencies, nongovernmental organizations, international coordinating agencies, and regional nongovernmental organizations. The bulk of the directory consists of reports from 88 individual countries. These reports provide such information (where applicable) as a brief sketch of the country; medical and educational policy; government agencies with mental retardation responsibility; voluntary organizations; publications and journals; other information for visitors; and brief descriptions of mental retardation program areas (including diagnosis, education, work training and employement, medical services, residential care, financial assistance, recreation, research, planning, and personnel training). Some brief travelers' tips are appended. (DLS)

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INTERNATIONAL DIRECTORY
OF
MENTAL RETARDATION RESOURCES

Edited by

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Research Associate
Florence Heller Graduate School for
Advanced Studies in Social Welfare
Brandeis University

First edition 1971
Revised 1977-78

U.S. DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
President's Committee on Mental
Retardation
Washington, D.C. 20201

INTERNATIONAL LEAGUE OF SOCIETIES
FOR THE MENTALLY HANDICAPPED
Rue Forestière, 13
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FOREWORD

(to the second edition)

A decade ago leaders in the field of mental retardation increasingly expressed the need for information on what was being accomplished, by whom, in various parts of the world. We have witnessed remarkable progress in the growth of service programs, based on increased knowledge of the potential development of mentally retarded persons, in many countries. At the same time, other than a few persons in one country knowing a few persons in another country, there was no systematically organized method of identifying and locating persons and agencies in the various countries throughout the world.

Several agencies and organizations recognized and accepted the responsibility of meeting the requests for an international directory. The International Association for the Scientific Study of Mental Deficiency and the International League of Societies for the Mentally Handicapped agreed to co-sponsor the venture. The(U.S.)President's Committee on Mental Retardation and the National Institute of Child Health and Human Development, U.S. Department of Health, Education, and Welfare assisted in providing funds. Dr. Rosemary Dybwad, Research Associate of the Florence Heller Graduate School for Advanced Studies in Social Welfare, Brandeis University, was engaged as Editor. As a result of the dedicated research by Dr. Rosemary Dybwad, and the excellent cooperation of literally hundreds of people, the first International Directory of Mental Retardation Resources was published in 1971.

During the intervening years again there have been rapid changes. New agencies have come into being to meet new needs of retarded persons in most countries of the world. Greater awareness of the rights of retarded persons has been met by the development of resources to see that these rights would be assured by providing needed services. As progress and change have occured in "developed" countries, so have they occured in "developing" countries. Increasingly there have been urgent requests for information, technical assistance and curricula materials to be exchanged. It soon became clear that a second edition, with updating of information and inclusion of new information, was critically needed.

As a result of discussions and correspondence between the International League of Societies for the Mentally Handicapped, (ILSMH -- the international organization of voluntary agencies), and the U.S. President's Committee on Mental Retardation, (PCMR --a Federal Government advisory body), agreement was reached that these two organizations would co-sponsor the compilation, publishing and initial distribution of a new revision of the International Directory. As previously, we were most fortunate in being able to obtain the devoted service of Dr. Rosemary Dybwad, with her unique special knowledge and skills, as Editor.

In March 1976, PCMR published Mental Retardation: Century of Decision, a major report to the President of the United States. Chapter Seven of this document is entitled "Mental Retardation as an International Problem." The goal, as stated by the President's Committee is "the attainment of a hugh and stable level of international relations in the cooperative resolution of the universal human problems of preventing and ameliorating mental retardation." One of the objectives enunciated as necessary for the attainment of that goal is "the development and maintenance...of international exchange of knowledge and information on all aspects of mental retardation." The President's Committee views its participation in co-sponsoring the publication of the International Directory as a major activity in the advancement of this goal and objective.

We are deeply indebted to a host of persons and agencies, the ILSMH, its Past President, Dr. Yvonne Posternak and present President, Dr. Donald Beasley, and its Secretariat; the PCMR International Affairs Task Force members (each of whom has given valuable cooperation and support to this undertaking), and to the many persons and organizations in countries in all parts of the world who have responded by furnishing data to be included in this volumn. Above all, we are most grateful to Dr. Rosemary Dybwad for her untiring and persistent efforts in tracking down information, her unequalled skill and ability to obtain, assemble, systematically organize and record information, and her complete devotion to service for mentally retarded persons throughout the world.

It is our hope, and we are confident that hope will be fulfilled, that this second edition of the International Directory of Mental Retardation Resources will be of immense value in furthering the exchange of knowledge among all countrieson behalf of all mentally retarded persons. It is also our expectation that it will be periodically updated in the future as need arises.

Fred J. Krause
Executive Director

A.D. Buchmueller
Program Specialist
International Affairs

President's Committee on Mental Retardation
Washington, D.C. 20201

FOREWORD

(to the first edition)

The development of services for the mentally retarded in the past two decades has been unprecedented in history. The forces which have brought about this significant change must await the careful analysis of future historians.

This rapid growth has resulted in a great need to exchange information and knowledge, not only among people in a given country, but between countries. The need to assist individuals, as well as local, national, and international organizations has generated a need to locate or identify appropriate individuals or agencies in various countries throughout the world.

As a consequence there has developed a demand for an "international directory." The responsibility for this directory was clearly recognized by the International Association for the Scientific Study of Mental Deficiency and the International League of Societies for the Mentally Handicapped.

The preparation of a document of this magnitude and complexity required much more than financial support. It required the dedicated efforts of many individuals in helping to gather appropriate information, assembling it into a readily useable format, and distribution to appropriate individuals and agencies.

We are indebted to the National Institute of Child Health and Human Development for its financial assistance. However, our greatest indebtedness is to Rosemary F. Dybwad who gave so much of herself and her time in preparing this document. Without her administrative skill, her knowledge of the people throughout the world who are engaged in mental retardation programs, and her unselfish devotion to carrying through the task -- this document would not have been completed.

The Directory will be consulted by many who would like to know more about what is going on throughout the world. It can be used by government agencies in obtaining valuable information to help in their planning for new programs. More than 60 countries have contributed to the preparation of this document. Hopefully, in the not-too-distant future every country of the world will be represented in it.

If this document, directly or indirectly, enables a single country to advance its services for the mentally retarded, then we have achieved our goal.

Harvey A. Stevens, Past President,
International Association for the
Scientific Study of Mental Deficiency,
American Association on Mental Deficiency

PREFACE

(to the first edition)

The past twenty years have seen a tremendous growth in mental retardation facilities and services. There have been very substantial, indeed revolutionary, improvements in the contributions made by various disciplines to the identification, education and training, treatment, rehabilitation and care of mentally retarded individuals as well as sweeping changes in the public attitude toward this disability and those disabled by it.

Without minimizing in any way the very significant advances made by many professions, it can fairly be stated that the major contributing factor to the rapid developments of the past two decades has been the impact of the consumer, represented largely by the associations for the mentally retarded which have sprung up since mid-century literally around the world.

From the earliest days these parent-sponsored consumer groups recognized that in a so rapidly-developing field much was to be gained from international exchange.

There was early recognition that there were striking variations in the quality of the services available and, moreover, that in this particular field some of the smaller countries were considerably farther advanced than some of the larger countries with a strong economic position.

One other factor needs to be mentioned: because of the long-existing prejudices toward the field of mental retardation as an area of little promise for research, therapy, education and rehabilitation, the usual media of professional communication, national and international journals, congresses, textbooks and monographs, paid little attention to the field and in the case of textbooks in particular tended to continue to circulate outdated and irrelevant information.

As a result consumer representatives, professional workers and public officials felt the need to "see for themselves," and, as a first step, made inquiries about what was going on in other countries. It was this ever-increasing volume of inquiries directed at the various national and international organizations in the field that led to the decision to publish this Directory.

Yvonne Posternak, Lic. Sc.: M.S.,
Past President,
International League of Societies
for the Mentally Handicapped

INTRODUCTION

This volumn is the product of the collaborative efforts of countless people around the world, volunteers, professional workers, state officials, and last but not least, the international public servants in the United Nations and its Specialized Agencies. Since it is obviously impossible to list each one, the editor wishes to express here her great indebtedness to all of them.

As much as possible the Directory tries to follow a uniform outline. However, the wide range of development level from country to country made this very problematical. For the same reason no attempt has been made to tabulate information and indeed the editor advises against such attempts. While much care has been taken to clarify the use of terminology, there is no question but that the respondents have used the same terms with wide variation in meaning.

Every effort has been made to check and recheck the information and to have a draft of each country report read by knowledgeable persons in that country. However, the swiftness of the progress in the field quite naturally results in equally swift and at times radical changes in the availability and organization of services. Still, it is hoped that the addresses given will at least lead the user of this Directory to persons who are in possession of the most recent information.

A major problem was to find for every country to be listed persons with sufficient grasp of the total situation, acquainted with the voluntary as well as the governmental field, in all the many program areas. In the introduction to the first edition we reported that efforts over a three-year period resulted, in the case of some countries, in such limited information that no report was possible. Fortunately, for the second edition we were able to include an additional 26 reports, some with only limited information but almost all from Third World countries, an indication of considerable change over the intervening period. It is hoped that the available information will encourage interchange through correspondence and visits between persons in these "developing" countries and their colleagues in other parts of the world, none of whom would claim as yet to have a fully "developed" system of services for retarded people.

Finally, reference should be made here to the very significant report by Dr. Richard Sterner on Social and Economic Conditions of the Mentally Retarded in Selected Countries, published in 1976 by the International League of Societies for the Mentally Handicapped for the United Nations Department of Economic and Social Affairs, Social Integration and Welfare Section, New York N.Y. 10017.

The editor wishes to express appreciation to the Florence Heller Graduate School for Advanced Studies in Social Welfare, Brandeis University, which has provided housing and supportive services for the Directory project.

Rosemary F. Dybwad
Research Associate
The Heller School
Brandeis University
Waltham, Massachusetts 02154

PART I

INTERNATIONAL ORGANIZATIONS *

A. THE UNITED NATIONS AND ITS SPECIALIZED AGENCIES

Far too many people in the world know the United Nations only through the political discussions of the General Assembly and the Security Council. Others may know one or two of the Specialized Agencies affiliated with the United Nations such as UNESCO, the United Nations Educational, Scientific and Cultural Organization, or ILO, the International Labour Organization, but few people have a clear picture of the broad network of services offered by the United Nations and the Specialized Agencies and of their interrelationships. Moreover, when it comes to so specific an area as mental retardation even persons quite informed about international social affairs tend to doubt that the United Nations Organization is actively involved with this question.

Yet, mental retardation is a world wide problem and, as the information in this Directory will indicate, is a reality even in the so-called developing countries once they reach a certain level of social organization.** In 1970, at the initiative of the French delegation, the Social Development Commission of the United Nations Economic and Social Council took time to consider the Declaration of General and Special Rights of the Mentally Retarded as promulgated in 1968 by the International League of Societies for the Mentally Handicapped. Under the title Declaration on the Rights of Mentally Retarded Persons, this affirmation that they are our fellow human beings was adopted, without a negative vote, by the General Assembly of the United Nations on December 20, 1971.

Overall, concern with mental retardation is part of the United Nations' concern with disability. On December 9, 1975, the General Assembly adopted the Declaration on the Rights of Disabled Persons, and in its 31st Session,in 1976, has proclaimed 1981 as the International Year for Disabled Persons.

Each of the agencies making up the United Nations family is particularly concerned with one or several aspects of the rehabilitation problem. The United Nations, in addition to its coordinating function, is especially concerned with the legislative, administrative, psychological, prosthetic and social services aspect of rehabilitation; the International Labour Organization in the vocational aspects of rehabilitation and with matters relating to the prevention of industrial accidents and occupational diseases, as well as social security; the World Health Organization in the prevention of disease and disability as well as in the medical aspects of rehabilitation; the UNESCO in matters concerning special education for children with handicaps; and the UNICEF in projects of direct assistance to child and maternal health services wherever these have a bearing on the welfare of the disabled. An Ad Hoc Interagency Meeting on Rehabilitation of the Disabled serves as a coordinating mechanism; relationship with the non-governmental organizations is assured by invited participation from the Council of World Organizations Interested in the Handicapped (CWOIH).

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* See: Compendium on the Activities of World Organizations Interested in the Handicapped, published and distributed for the Council of World Organizations Interested in the Handicapped (CWOIH) by Rehabilitation International (RI), New York. Much of the material in this section of the Directory has been taken from this excellent and detailed Compendium.

** For example, as United Nations agencies extend aid to improve the general developmental level of a country by such measures as better maternal and child health care, a more adequate nutritional level and improved sanitation, perinatal and infant mortality will decrease and the number of children with substantial intellectual and physical deficits will increase. Requests for services and facilities are the inevitable consequence.

UNITED NATIONS　　　　Founded 24 October,1945
New York, N.Y. 10017

Centre for Social Development and Humanitarian Affairs
Assistant Secretary-General: Mrs. Helvi Sipila
Social Development Division
Social Integration and Welfare Section
Officer-in-Charge: Mr. Esko Kosunen
Social Affairs Officer (Rehabilitation):Mr. Milos Bjelic

The First General Assembly of the United Nations adopted, on 14 December 1946, Resolution 58 (I) which established the program of advisory social welfare services. Rehabilitation of the handicapped was specifically mentioned in this Resolution. Thus, since early 1947, expert consultants, fellowships and technical equipment have been provided to numerous countries, and seminars, international conferences and study groups have been organized to deal with problems related to rehabilitation of the disabled.

In a limited number of cases such activities have been exclusively concerned with mental retardation, in response to requests from member countries; in many other cases mental retardation has been included with other disability areas. Reference has been made above to the Declaration on the Rights of Mentally Retarded Persons (1971), the Declaration on the Rights of Disabled Persons (1975), and the adoption of 1981 as the International Year for Disabled Persons. For the past 20 years the UN Secretariat has prepared an annual Summary of Information on Projects and Activities in the Field of Rehabilitation, including both governmental (UN) and non-governmental organizations (ESA/SDHA/Misc.)

It is expected that the Centre for Social Development and Humanitarian Affairs, including its Division of Social Affairs in the UN Office at Geneva, will move to Vienna in the near future.

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UNITED NATIONS CHILDREN'S FUND

UNICEF Headquarters
United Nations
New York, N.Y. 10017

Mr. Henry R. Labouisse, Executive Director

UNICEF is an organ of the United Nations (not a Specialized Agency) founded December 1946 by Resolution of the General Assembly to assist governments in programs for the improvement of child health and welfare.

UNICEF has provided essential imported supplies and equipment to help governments establish or strengthen programs for the treatment and rehabilitation of handicapped children. In some cases the Fund has also provided training fellowships for study abroad and visits to model demonstration centers for care of handicapped children.

As such special services are more expensive and call for trained and experienced staff, these programs are relatively costly in relation to the numbers of children helped. Thus they have had a lower priority for UNICEF assistance than programs for control of mass diseases or for preventive health services for mothers and children.

In all of its aid programming, UNICEF emphasizes the laying of a sound basis for comprehensive and continuous services, and not merely the meeting of immediate needs. Specialized help to handicapped children is given only where such services are part of the basic framework and organization of maternal and children's service in a community.

In general, UNICEF assistance has been limited to physically handicapped children, with a few exceptions.

INTERNATIONAL LABOUR ORGANIZATION
Avenue Appia
1211 Geneva 22, Switzerland

Mr. Norman E. Cooper, Chief
Vocational Rehabilitation Section
Vocational Training and Guidance Branch
Training Department

Established in 1919, in 1946 it became the first Specialized Agency associated with the United Nations.

The stated purpose of the ILO is to improve working and living conditions througnout the world and thus provide for universal and lasting peace and social justice.

In the rehabilitation field the main activities of the ILO include:

-establishment of international standards on vocational rehabilitation;

-provision of technical cooperation by means of consultant missions, fellowships, and equipment;

-seminars, study groups and training courses;

-research and publications.

In the general field of rehabilitation the ILO is especially concerned with matters relating to industrial accidents and occupational diseases, protection of young workers, vocational guidance, vocational training, placement and conditions of work in open and sheltered employment, and social security.

A keystone in the ILO's work is Recommendation No. 99, adopted in 1955 by the International Labour Conference; it constitutes the magna carta of rehabilitation and specifically covers mental as well as physical disability, and includes special provisions for disabled children and young persons.

INTERNATIONAL SOCIAL SECURITY ASSOCIATION Founded 1927
Avenue Appia, c/o ILO
1211 Geneva 22, Switzerland

The purpose of the ISSA is to cooperate, at the international level, in the protection, promotion and development of social security throughout the world, through its technical and administrative improvement. Since 1969 the ISSA Study Group on Rehabilitation has been responsible for specific studies and inquiries; one of these with special emphasis on mental retardation was a 1970 report on "Problems connected with the special education of handicapped children."

UNITED NATIONS EDUCATIONAL, SCIENTIFIC AND CULTURAL ORGANIZATION
7, place de Fontenoy
75700 Paris, France

Established as a Specialized Agency related to the UN on November 4, 1946.

Mr. Nils-Ivar Sundberg, Special Programmes Section
Division of Structures and Content of Life-long Education

UNESCO's purpose is to contribute to peace and security by promoting collaboration among the nations through education, science, and culture in order to further universal respect for justice, for the rule of law, and for the human rights and fundamental freedoms which are affirmed for the peoples of the world, without distinction of race, sex, language, or religion, by the Charter of the United Nations.

in 1960 the Recommendation on Special Education for Mentally Handicapped Children (No.51) was adopted by the International Conference on Public Education convened jointly by UNESCO and the International Bureau of Education in Geneva (now part of UNESCO). At the same time UNESCO continued various activities devoted to the study of maladjustment and delinquency. Although special education has always been recognized as falling within the competence of UNESCO, a comprehensive program in this field was only drawn up in 1966, when UNESCO's 14th General Conference adopted Resolution 1.133 on special education for the handicapped as a basis for future activities. In 1968 an official was appointed to be responsible for the program, and means are continually sought, also through extra-budgetary and voluntary contributions, to intensify the work, appropriate to the magnitude of the problem and the urgency of the needs of Member States.

Main goals are to:

- establish and develop contacts with the United Nations Organization and its Specialized Agencies concerned, as well as with Non-Governmental Organizations working for the handicapped;
- organize and run world-wide studies in each of the several fields of special education, such as education of the blind, the deaf, the mentally and the physically handicapped;
- assist Member States, on their request, through consultants, in planning activities and training teachers; providing fellowships, supplying material and equipment to Member States for the establishment of special education programmes.

A list of publications on special education is available from the UNESCO Secretariat in Paris; some are distributed free of charge, and others are on sale through the national distributors of UNESCO publications.

In 1976 some 20 countries received assistance from UNESCO for educational projects for handicapped children (non-categorical); in four additional cases, Liberia, Madagascar, Jordan and Venezuela, requests were specifically made for assistance in the education of mentally retarded children.

WORLD HEALTH ORGANIZATION
Avenue Appia
1211 Geneva 22, Switzerland

Dr. N. Sartorius, Director
Division of Mental Health

Established as a Specialized Agency of the United Nations on April 7, 1948.
Dr. Halfdan Mahler, Director-General

The objective of the WHO is the attainment by all people of the highest possible level of health, defined as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

Although the maternal and child health and the genetics programs of WHO have special relevance for the field of mental retardation, the Mental Health Unit (in 1977-Division) was the first to become actively involved and has remained the most concerned. The work of Expert Committees convened in 1953 and in 1967 resulted in publications which have become basic world-wide references: The Mentally Subnormal Child, WHO Technical Report Series No. 75, 1974, and Organization of Services for the Mentally Retarded, WHO Technical Report Series No. 392, 1968. In addition, special consultation groups have been called together on specific subject areas; services of technical consultants and travel study fellowships have been provided to Member States.

The WHO European Regional Office has sponsored important seminars and studies in mental retardation over the years; in 1973 the Pan-American Health Organization (Regional Office for the Americas) held a conference on mental retardation in Cartegena, Colombia.

In 1975 the 28th World Health Assembly adopted a Resolution urging Member

States to sponsor research in mental retardation and focus also on prevention. The Director-General was requested to assist States in this endeavor, and in the development of community care programs and of guide lines for personnel training.

At the 30th World Health Assembly in 1977 the Director General submitted a very significant, detailed report,and the Assembly urged Member States to accord adequate priority and develop plans of action to prevent mental retardation and provide necessary support for mentally retarded individuals and their families, mainly through non-institutionalized community action.

B. INTER-GOVERNMENTAL (REGIONAL) AGENCY

Instituto Interamericano del Niño (IIN) Founded in 1927

Inter-American Children's Institute (IACI)

Avenida 8 de Octubre 2904
Montevideo, Uruguay

Dr. Rafael Sajón, Director General
Profa. Eloísa García Etchegoyhen de Lorenzo,
Jefe de la Sección Retardado Mental

In 1949 the Inter-American Children's Institute became an official agency of the Organization of American States (OAS) which has its headquarters in Washington, D.C, (The other specialized organ of OAS is its Inter-American Committee of Women.) In 1965, following the first Inter-American Workshop (Seminario) on Mental Retardation, sponsored by the U.S. Department of Health, Education and Welfare and the University of Puerto Rico, in San Juan, with the cooperation of the Inter-American Children's Institute, the OAS established the Mental Retardation Section within IACI. This is the first and still the only such inter-governmental bureau specifically devoted to mental retardation; in recent years its function has widened to include problems of children with borderline intelligence, cultural deprivation, any learning disabilities. Under the leadership of Eloisa de Lorenzo, internationally known leader in special education, IACI has arranged for regional inter-country seminars and conferences, has provided consultation throughout the hemisphere, has issued a bilingual bulletin and special publications, original and in translation, on many different aspects of the problem.

C. NON-GOVERNMENTAL ORGANIZATIONS ACCREDITED BY THE UNITED NATIONS OR ONE OF ITS SPECIALIZED AGENCIES

1. *Concerned primarily with mental retardation*

International League of Societies for the Mentally Handicapped (ILSMH)

Rue Forestière, 13 — Founded 1960/62
1050 Brussels, Belgium (Secretariat)

Dr. D.M.G. Beasley (New Zealand) President
Mr. Jacques Gemaehling (France) Secretary General

The International League of Societies for the Mentally Handicapped was formally established in 1962 as successor to the European League, founded in 1960 by representatives of parents' organizations, professional groups and by individuals committed to advance the interests of the mentally retarded without regard to nationality, race or creed.

Through creation of a common bond of understanding between parents and others interested in the problems of retarded persons, the League hopes to secure on their behalf from all possible sources the provision of efficient remedial, residential, educational, training employment and welfare services. Main goals are:

- To develop policies on the various aspects of mental retardation, arising from the solidarity and collaboration between mentally handicapped persons, their families and specialists, aimed at rehabilitation;
- To make known these policies; to disseminate information as widely as possible, and,when necessary,act as a pressure group;
- To initiate and maintain contacts with international organizations, as spokesman for its member societies;
- To stimulate the creation of new associations and assist developing associations; to keep all member societies informed and promote contacts between them in order to facilitate their work on behalf of retarded persons in their own countries.

The ILSMH has a membership of 76 assocations with national societies in 37 countries, affiliates in 29 countries and 2 regional organization associate members (the Caribbean Association and the Asian Federation). Publications are available from the Secretariat; a Newsletter is issued in French, English, German and Spanish.

World Congresses are held in 3 or 4 year intervals; the Seventh will meet in October 1978 in Vienna, with the theme "Choices - for the individual, for the family, the professional and society." In the intervening years regional conferences have been held (Brazil and Tunisia), and a continuing series of symposia on such specific areas as employment, legal and legislative questions, guardianship,residential services, recreation,education, normalization and integration. Special taskforces work in areas as Personnel Training (Manpower), Implementation of the Rights of Retarded Persons, and since 1966, a Committee on Architecture and Environmental Design.

The League is recognized by UNESCO, ILO, UN and WHO through the Joint Commission (see below) and maintains contacts with other NGO's through CWOIH.

International Association for the Scientific Study of Mental Deficiency

1976-1979 Officers: Founded 1964

President : M.J. Begab (USA)
President-Elect : H.O. Åkesson (Sweden)
Vice-Presidents : B.E. Cohen (Israel), I. Wald (Poland)
Treasurer : J.B. Meiresonne (The Netherlands)
Secretary : D.A. Primrose - The Royal Scottish National Hospital
Larbert, Stirlingshire, Scotland FK5 4EJ

The International Association for the Scientific Study of Mental Deficiency was founded at the 1964 International Congress in Copenhagen which had been preceded by scientific congresses in Vienna (1961), London (1960) and Portland,Maine,(1959).

The purpose of the IASSMD is to promote the scientific study of mental deficiency, through a multidisciplinary approach, by serving throughout the world as a medium for exchange of knowledge and experience, dissemination if information through organization of congresses and other meetings; to encourage research including causation, prevention, diagnosis and evaluation, therapy, management, education and social habilitation; to encourage the creation of multidisciplinary, scientifically origanizations on a national level. Membership consists of 30 such organisations in 26 countries, plus individual members.

International Congresses are held in three year intervals, and proceedings are published. (Montpellier, France, 1967; Warsaw, Poland, 1970; The Hague, The Netherlands, 1973; Washington, D.C.,USA, 1976). The proceedings of this Fourth Congress were edited by Peter Mittler (U.K.) in three volumns, Research to Practice in Mental Retardation -I: Care and Intervention, II: Education and Training, III: Biomedical Aspects. The Fifth Congress is scheduled to be held in Jerusalem, August 1-7,1979 on the theme: Frontiers of Knowledge.

A group of individual IASSMD members is publishing REAP, an international journal on research exchange and practice in mental retardation, with a western European orientation and specific interest in practical aspects of mental retardation care. It is published in English with French and German summaries, by Swets & Zeitlinger B.V., Amsterdam, The Netherlands.

Joint Commission on International Aspects of Mental Retardation

13 rue Forestière
1050 Brussels, Belgium
Chairman (1976-1978) Professor A.D.B. Clarke (U.K.)

In order to assure effective representation in the area of mental retardation to the World Health Organization, and in compliance with WHO suggestions relating to NGO relationships, the Joint Commission on International Aspects of Mental Retardation was formed by the ILSMH and the IASSMD. It was accorded consultative status by WHO in 1969; chairmanship rotates biannually between the two organizations. Policy papers have been prepared for WHO on such areas as Services and Prevention.

2. *Non-governmental organizations (NGOs) which include mental retardation in their program statement* *

Bureau International Catholique de l'Enfance (BICE)

International Catholic Child Bureau (ICCB)

Commission Médico-Pédagogique et Psycho-Social Founded 1947
53, Rue de Babylone
75007 Paris, France General Secretaries: Abbé E. Paulhus
Mlle. M.H. Mathieu

Through its Medico-Educational and Psycho-Social Commission, this organization has consistently included in its program concern for mentally retarded children and young people. The Commission has organized numerous study groups on such subjects as special education, vocational rehabilitation, leisure time, social, religious and affective development; these meetings and their documentation have provided significant opportunities for international exchange.

International Council on Social Welfare (ICSW)

345 East 46th Street Founded 1928
New York, N.Y. 10017 - USA
Secretary-General: Mrs. Kate Katzki

In its recent world conferences the International Council on Social Welfare has included meetings on the subject of mental retardation with cooperation from the International League of Societies for the Mentally Handicapped,an affiliate member of the ICSW.

(Following the XIX International Conference and 50th Anniversary in Jerusalem, August 20-27, 1978, the ICSW Secretariat will be relocated in Vienna.)

Rehabilitation International (RI) Founded 1922

432 Park Avenue South
New York, N.Y. 10016 - USA
Secretary General: Mr. Norman Acton

Rehabilitation International, formerly the International Society for Rehabilitation of the Disabled and originally oriented to physical disabilities, has given increasing attention to the problems of the mentally handicapped. Through its Committee on Special Education, now the Education Commission, RI has held international seminars on special education preceding each of its world congresses since 1960, with particular emphasis on the question of mental retardation. (See also CWOIH for which RI provides the Secretariat services.)

**It is always difficult to choose organizations for a particular listing -- the choice depends much on "the eye of the beholder." The following listing was largely abstracted from the Compendium on the Activities of World Organizations Interested in the Handicapped by selecting those which in recent years, to the editor's knowledge, had undertaken specific activities in the field of mental retardation.*

International Union for Child Welfare (IUCW)

Founded 1920

Union International de Protection d'Enfance (UIPE)

1, rue de Varembe
1211 Geneva 20
Switzerland

Secretary General: Mr. P. Zumbach

The 1924 Geneva Declaration on the Rights of the Child, the basic document of the IUCW and the document on which the UN Declaration is based, included special reference to the needs of the physically and mentally handicapped child. This concern has been reflected in the conferences, study groups and publications of the IUCW. From 1964 to 1967 the IUCW sponsored a project on rehabilitation of the retarded, providing consultation to many countries.

League of Red Cross Societies

P.O. Box 276
211 Geneva 19,
Switzerland

Founded 1919

Since 1921 the League of Red Cross Societies has aimed at developing among its member societies interest in rehabilitation of the disabled, covering physical, psychological as well as social aspects. Several member societies have developed programs for mentally retarded people, including residential services.

World Federation for Mental Health (WFMH)

c/o Professor Tsung-yi Lin, M.D.,President
2255 Wesbrook Crescent
University of British Columbia
Vancouver, B.C. V6T 1W5 Canada

Founded 1948

The World Federation for Mental Health has member associations in more than 50 countries and several thousand individual associates. In its international conferences the WFMH has included sessions on mental retardation and many of its members are directly involved in providing services to retarded persons and their families.

L'Union Mondiale pour la Sauvegarde de l'Enfance et de l'Adolescence (UMOSEA)

World Union for the Safeguard of Youth

Founded 1956

28, place Saint-Georges
75442 Paris, France

President: Professor Robert Lafon
Adm. Secretary General: Mme. T. Rividi

The UMOSEA seeks to help national organizations for the care of maladjusted and handicapped children to study their technical and administrative problems at the international level. It specifically includes mentally retarded children and adolescents in its program of conferences, studies and publications.

Boy Scouts World Bureau

Case postale 78
1211 Geneva 4, Switzerland
Founded 1920

Scouting for the handicapped, now active in more than 50 countries, has become a very important program not only for the benefits to its active participants but for its impact on young people in general and on the community. Mentally retarded boys have greatly benefitted from this movement. In addition, in some countries such as Sweden, the Scout movement (including both boys and girls) has supported a variety of other community projects on behalf of the mentally retarded.

International Cerebral Palsy Society

12 Park Crescent
London W1N 4EQ, U.K.
Founded 1969

Honorary Secretary General: Mr. James Loring

Formed from the former World Commission for Cerebral Palsy of Rehabilitation International, the Society is concerned with all aspects of services for persons with cerebral palsy, regardless of intellectual ability; it encourages the formation of national organizations and development of research and services; it holds conferences and disseminates information to its membership in more than 30 countries.

World Confederation of Organizations of the Teaching Profession

5, avenue du Moulin
110 Morges, Switzerland
Founded 1952

Secretary General : Mr. John M. Thompson

This organization has only recently taken steps in the interest of handicapped persons; in 1974 it held a European Seminar in Dublin on the education of handicapped children.

D. INTERNATIONAL COORDINATING AGENCIES

United Nations Ad hoc Interagency Meeting on Rehabilitation of the Disabled

Rehabilitation Unit, Social Development Division
New York, N.Y. 10017

Acting pursuant to a resolution of the Economic and Social Council calling for a well-coordinated international program for rehabilitation of physically handicapped people, the UN Administrative Committee on Co-ordination arranged for a meeting of the appropriate technical officials of the United Nations and the Specialized Agencies concerned. Thus, on December 18,1950 the Ad hoc Interagency Meeting on Rehabilitation of the

Disabled came together for the first time and has convened annually ever since. Represented are the Rehabilitation Unit of the Social Development Division, ILO, WHO, UNESCO, UNICEF and the UN High Commissioner for Refugees. In spite of its informal status (even after 28 years of operation this is still referred to as an Ad hoc Meeting rather than a committee or commission), the activities of this group have been very successful in focusing on the expanding needs of rehabilitation of persons with mental as well as physical handicaps. Invited representatives from CWOIH, the Council of World Organizations Interested in the Handicapped, are in attendance at the Ad hoc Meetings, thus facilitating coordination and cooperation with the non-governmental organizations.

Council of World Organizations Interested in the Handicapped (CWOIH)

c/o Rehabilitation International
432 Park Avenue South
New York, N.Y. 10016

Chairman: Mr. Norman Acton

CWOIH was formally established in 1953 after non-governmental organizations active in the rehabilitation field had met, at the initiative of the United Nations, in line with a 1950 resolution of the Economic and Social Council (ECOSOC) calling for cooperation between the UN and the non-governmental rehabilitation agencies.

Membership in the Council is open to any non-governmental organization which has been accorded an official relationship with ECOSOC, ILO, WHO UNESCO or UNICEF. The purpose of the Council is to assist the UN and Specialized Agencies and to enlist their cooperation in developing a well coordinated international program for rehabilitation of the handicapped; to serve as a liaison body in pursuit of these efforts; and to develop cooperation and methods of common action between the non-governmental organizations themselves.

A listing, giving a descriptive statement on each of the Council's more than 35 members and of the UN and Specialized Agencies, is available in the Council's publication Compendium on the Activities of World Organizations Interested in the Handicapped.

The International League of Societies for the Mentally Handicapped is a member of CWOIH and the League's Geneva representative, Mme. Y. Posternak presently serves on the Executive Committee.

E. REGIONAL NON-GOVERNMENTAL ORGANIZATIONS

Nordiska Förbundet Psykisk Utvecklingshämning (NFPU)

Nordic Association on Mental Retardation

Chairman: N. E. Bank-Mikkelsen
Socialstyrelsen Saerforsorg
Postbox 2555
2100 Copenhagen Ø., Denmark

Meetings on mental retardation have been held from time to time in the

Scandinavian countries since the end of the last century. In 1963 the Nordic Association on Mental Retardation was formed with membership open to all interested persons (now numbering well over 1,000). The executive board consists of representatives from each country, Denmark, Finland, Iceland, Norway, Sweden and,since 1975, the Faeroe Islands. Congresses are held every three years, with seminars and symposia or special topics during the intervening years. Some recent themes have been: Individual or group cnetered activities? Educational and psychological research; Training of physicians; Technical aids for retarded persons; early stimulation of infants at home; activation programs for the severely disabled.

Psykisk Utvecklingshämning is published quarterly, with summaries of many articles in English. It is edited by Dr. Karl Grunewald, Socialstyrelsen, 106 30 Stockholm, Sweden.

European Association for Special Education (EASE)

c/o Walter Lund, Secretary
S.I. Peregatan 95
601 81 Norrköping, Sweden

or: c/o Olof Magne
Beleshogsv. 22
217 74 Malmö, Sweden

The Association's first conference was held in Sweden in 1971, and included an extensive exhibition of special education materials from various countries. Meetings have since been held in Spain and England; it will be cooperating in the World Congress on Future Special Education being held in June 1978 in Scotland, organized by the Council for Exceptional Children, USA.

Caribbean Association on Mental Retardation (CAMR)

c/o Mrs. Josefina B. Millán, Secretary
F-17 B Terrace
Mayagüez, Puerto Rico, 00708 USA

Formally organized in 1972 after several years of planning, the CAMR represents approximately 28 small countries and territories in the Caribbean area. Voluntary associations in a few of them, involving parents, professional workers, officials and interested citizens, were started in the early 1950s; in most, however, the mental retardation efforts are just beginning. Caribbean Conferences on Mental Retardation have been held biannually, in Jamaica, Barbados, Puerto Rico and the Dominican Republic. CAMR sponsors a Caribbean Institute on Mental Retardation and Developmental Disabilities, started in 1976 as a combined regional effort especially to provide training and informational services. Support has come from may sources, but mainly from the Canadian Government Development program and the Canadian Association for the Mentally Retarded. The Institute is located at 2D Suthermere Road, Kingston 10, Jamaica.

Agrupación Ibero-Latinoamericana sobre Deficiencia Mental (AILA)

Ibero-Latinamerican Group on Mental Deficiency

c/o Dr. Joelson Amado, President
Rua Itacolomi 333
São Paulo, Brazil

Founded in 1968 as an affiliate of the International Association for the Scientific Study of Mental Deficiency, AILA has held conferences in Mexico, Spain and Venezuela; it also meets during the International Congresses of the IASSMD, providing a forum and opportunity for exchange between the professional workers of the Spanish-language countries.

Asian Federation for the Mentally Retarded

c/o Mr. D.R. Daniel, President 1977-1979
Selangor Association for Retarded Children
67 Jalan 5/31 or: P.O.Box 2683
Petaling Jaya (Kuala Lumpur), Malaysia Kuala Lumpur

Founded in 1973 at the First Asian Conference on Mental Retardation, held in Manila, the Federation brings together voluntary and professional associations for the mentally retarded in some 13 Asian countries. The Second Conference was held in Tokyo in November 1975 organized by the Japan League, the umbrella association of all the concerned organizations, and the Third Conference took place in Bangalore, in charge of the Federation for the Welfare of the Mentally Retarded (India). To date, ongoing responsibilities are assumed by the President and the country where the next conference will be held. An important goal of the Federation is to encourage the development of policies and methods which are culturally appropriate to the situation of mentally retarded persons in Asia.

F. OTHER ORGANIZATIONS WORKING INTERNATIONALLY

International Federation of l'Arche

Trosly-Breuil or Daybreak
60350 Cuise-la-Motte, France Richmond Hill, Ontario, Canada
President : Jean Vanier

L'Arche is a federation of communities and homes in which handicapped people and those who chose to share their lives live and work together. It started in 1964 in Trosly, a village in northern France, inspired and led by Jean Vanier. There are now more than 40 communities in France, Britain, Denmark, Norway, Belgium, Canada, the USA, India,Haiti and the Ivory Coast.

Camphill Movement and other residential programs based on the anthroposophical principles of Rudolph Steiner: Schools and villages have been established during the last 40 years in Britain and many other parts of the world. Information can be requested from the Camphill Village Trust Ltd., Delrow House, Aldenham, Watford, Herts. WD2 8DJ, U.K.

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ALGERIA

The Democratic and People's Republic of Algeria, located in northwest Africa on the Mediterranean Sea, with its capital at Algiers, occupies an area of 919,595 square miles. The population is about 17 million, with more than 1/2 being children and adolescents, and is increasing rapidly. The people are primarily Berber-Arabic, but there are also about 150,000 inhabitants of Turkish and other European descent, of whom less than 50,000 are French. The religion practiced by about 99% of the people is Sunni Moslem, and Arabic is the national language.

The land is divided into 3 geographic regions: coastal fertile lands, the inland plateau, and the Sahara Desert. About 60% of the people live in rural areas where cereals, wine, citrus fruits, olive-oil, dates and cattle raising constitute the main sources of income. Iron ore and phosphate mining, various industries, and especially oil and natural gas production provide a large part of the national economy.

Algeria, a socialist country, directed by the National Liberation Front, became independent from France in 1962. A new constitution was approved in 1976 and a President and Popular National Assembly have been elected since then. Lands and industries belong mainly to the cooperative and public sectors.

Education is free and compulsory for 6 to 16 year olds. Medical care is also free and socio-medical services are operated by governmental or semi-governmental agencies. Social security benefits are available to all workers, including those in agriculture and free professions.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ministry of Health
128 chemin Gacem Mohamed
El Madania
Algiers

Ministry of Education
Avenue de Pékin
Algiers

Ministry of Labor and Vocational Training
28 rue Hassiba Ben Bouali
Algiers

VOLUNTARY ORGANIZATION

With primary concern in mental retardation

Association Aide aux Inadaptés
48 chemin Fatma Zohra Malik
Algiers

Association for Aid to the Retarded

Started in 1974, this parents' society receives government assistance. It has pioneered in initiating services for retarded children and their families, and in public information programs.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Most services are located in the capital, are day services, are free of charge and are for children and adolescents. A specialized school for the mildly retarded was already in existence at the time Algeria became independent in 1962, and a second one has been opened in Oran since then. Community day center services are provided at 7 centers established by the local parents' society; 5 are for moderately retarded children and some multiply handicapped children (ages 5 to 11), and 2 are for adolescents and provide vocational training and sheltered workshops.

The medico-psycho-pedagogical day center opened by the Ministry of Health in 1974 provides psychiatric and psychological treatment, psychomotor training and sensory stimulation for about 100 mentally handicapped and psychotic children aged 5 to 15. It also provides outpatient services for children, adolescents and adults. Parent consultation is also provided by the local parents' society and in all university hospitals (especially in the children's clinics), as well as in other psychiatric and psychological services run by the Ministry of Health.

Since 1973, specialized personnel training is being given for éducateur aides and éducateurs (child care workers). There are about 60 trained workers in the existing services.

In terms of planning, special legislation for the mentally retarded is under study, especially in the field of preventive and prophylactic measures, as well as projects for more medico-psycho-pedagogical centers to be run by the Ministry of Health. In the voluntary sector, plans have been initiated toward establishment of a Fédération Nationale de Parents d'Enfants Inadaptés.

OTHER INFORMATION FOR VISITORS

Requests for information, preferably in French or Arabic, can be made to:

Association Aide aux Inadaptés
48 chemin Fatma Zohra Malik
Algiers

School holiday periods -From July to mid-September.

In the existing centers, the holiday periods are about the same as in public schools. They are especially long in summer (two and one half months), and efforts are made in the centers to reduce them in order to intensify the care of the children.

ARGENTINA

Area - 1,072,068 square miles; population - about 23 million; government - a republic governed by a president. The second largest country in the Southern continent, Argentina is bordered on the west by the Andes mountains and stretches from the sub-tropical lowlands in the north to the bleak Patagonian steppe and rainy Tierra del Fuego in the far south, with the heartland area the fertile plains of the central pampas.

Under Spanish rule until 1810, the population of the country is now predominantly of Spanish and Italian origin, with substantial groups from other countries such as Germany and Lebanon. Only about 3% of the population is Indian and mestizo. The official language is Spanish and 94% of the people are Roman Catholic.

The country is dominated by its agricultural interests which support meat packing as one of the major industries. However, the metropolitan area of Buenos Aires and La Plata, with more than 1/3 of the population, has built up a considerable amount of diversified and heavy industries, found also in the provinces of Córdoba and Santa Fe.

Primary education is free, secular and compulsory. The literacy rate (86%) is one of the highest in Latin America. However, in the rural areas and urban slums many children attend school for a few years only, leaving in order to help with family income.

Argentina has a comprehensive system of social security, including old age, invalidity and survivor's insurance, sickness and maternity benefits for employed women, and workmen's insurance. Since 1957 it has an employment related system of family allowances.

Although special education services have been developed in Argentina for several decades, they are not supported by specific legislative enactment. Furthermore, as in some other countries, special education services are partly within the system of education and partly within the system of health services. In the beginning, programs for the mentally retarded were maintained and supported largely by private organizations or individuals. This is still largely the case with services for the more severely retarded, as the public schools are accommodating more of the milder cases.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministerio de Educación	Ministry of Education
Dirección General de Enseñanza Diferenciada Independencia 4248 Buenos Aires	Department of Special Education
Consejo Nacional de Educación Pizzurno 935, Buenos Aires	National Council of Education (responsible for pre-school and primary education)
Supervisión Nacional de Enseñanza Privada Pizzurno 935, Buenos Aires	National Supervisory Office for Private Schools (including private schools for the mentally retarded)

Ministerio de Bienestar Social	Ministry of Social Welfare
Consejo de la Minoridad y de la Familia Defensa 120, Buenos Aires	Council for Youth and Family
Centro de Atención Familiar Defensa 120, Buenos Aires	Center for Family Affairs
Secretaría de Salud Mental	Secretariat of Mental Health
Dirección Nacional de Salud Mental Barracas 489 1275 Buenos Aires	Department of Mental Health

Important provincial public agencies - In each of the 22 provinces of Argentina there are comparable agencies. For example, Buenos Aires Province has more than 131 official schools for the mentally retarded. These include vocational training centers called "escuelas laborales" and "escuelas de adaptación laboral para deficientes severos." Other provinces with a considerable number of services are Tucumán, Córdoba, Mendoza and Santa Fe.

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation

Professional

Asociación Argentina para el Estudio Científico de la Deficiencia Mental Azcuénaga 1561, Buenos Aires	Argentina Association for the Scientific Study of Mental Deficiency

Organized in 1967, the Association is affiliated with the International Association for the Scientific Study of Mental Deficiency.

Private

Federación Argentina de Entidades Pro-Atención al Deficiente Mental (FENDIM) Casilla Correo Central 1315 1000 Buenos Aires	Argentina Federation for the Mentally Retarded

Established in 1966 and uniting more than 50 associations of parents throughout the country, FENDIM holds symposia and conferences and, in connection with its technical advisory board, promotes public information, studies legislative needs, presses for extension of governmental programs for the retarded through its affiliates, and provides counseling services for parents. Most of its affiliates support day schools and/or vocational training or sheltered work programs. FENDIM became a member of the International League of Societies for the Mentally Handicapped in 1968.

RESEARCH

In Buenos Aires

Hospital de Niños
Servicio de Neurología
Bustamante 1399

Hospital Infanto Juvenil
Vieytes 489

Fundación de Investigaciones Neurológicas
Tacuarí 351

Centro de Estudio y Asistencia
Médico-Psiquiátrico de la
Niñez y Adolescencia (CEAM)
Freire 2145

In La Plata, Province of Buenos Aires

Hospital de Niños
Servicio de Psicopatología

Universidad Nacional de La Plata
Facultad de Humanidades y Ciencias de la
Educación, Cátedra de Pedagogía Diferenciada
Calle 6 entre 47 y 48

Dirección de Enseñanza Diferenciada de la Provincia de
Buenos Aires
Diagonal 74, esquina 57

Similar programs exist in other universities throughout the Provinces. A list is available through FENDIM.

PUBLICATIONS

Boletín de la Asociación Argentina para el Estudio
Científico de la Deficiencia Mental
Azcuénaga 1561, Buenos Aires

Revista de Sanidad Escolar
Saavedra 15, Buenos Aires

Boletín Informativo de Enseñanza Diferenciada
Diagonal 74 esquina 57, La Plata, Provincia de B.A.

Revista de Educación del Ministerio de Educación
de la Provincia de Buenos Aires

Archivos de Ciencias de la Educación
Calle 45, No. 548, La Plata, Provincia de B.A.

Anales del Instituto de Investigaciones Psicopedagógicas
Universidad Nacional de Cuyo, San Luis

Revista del Hospital de Niños
Gallo 1330, Buenos Aires

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - is carried out by the hospital services, especially in departments of pediatrics, psychiatry and neurology. Certain centers especially concerned with the problem have been listed above, under Research. Pediatricians are showing a growing interest in mental retardation, and multidisciplinary training of other medical professions, of psychologists and teachers, is being developed in recent years. A main goal of FENDIM is to provide consultation and services to parents.

Education - Throughout the country there are about 250 special schools concentrated in the more densely populated areas. It is estimated that they do not cover the necessities of the mentally retarded population. There are also a rather large number of private institutions, mainly for smaller children, well-staffed with young teachers, but the majority of all these schools accept only mildly and some moderately retarded children. There is resistance on the part of the public and the education authorities to the idea of integrating special education in the system of general education. Some of the difficulties originate in the scarcity of funds for education, in the low population density in rural areas complicating the provision of services, and the lack of public understanding. Nevertheless, during recent years the number of special schools has increased due to the efforts of the parent associations.

Work training and employment - Planning for provision of these services is still quite new. In the 5 public special schools in Buenos Aires vocational training workshops operate after the regular school hours. In some schools in the Province of Buenos Aires (for example, in Berisso) a beginning has been made with the placing of retarded pupils for training in neighborhood industries. Sheltered workshops, in the technical sense of the term, do not as yet exist, although several such programs are under consideration. Mention should be made of ESFADI, a technical school for vocational training established by a parent association in Buenos Aires.

Medical services - Specialized medical attention is available from centers indicated above under Case Finding and Diagnosis.

Residential care - Until now this has been provided in wards of psychiatric hospitals, under supervision of the Instituto Nacional de Salud Mental, or in its 4 specialized institutions for severely and profoundly retarded persons. There are also private institutions, including special boarding schools. The recently established Hospital Infanto Juvenil in Buenos Aires (see above under Research) includes modern accommodations for the mentally retarded.

Financial assistance - Financial assistance to establishments for handicapped persons is subsidized to a certain extent by the Ministry of Social Welfare or the Secretariat of Public Health. People who can pay for hospital care must do so; those who cannot are attended free. Establishments for the mentally retarded, if governmental, are free, but mostly a "cooperativa de padres" (parents support group) is formed to enable better attention to be given the pupils. Private schools and residential care units are rather expensive or are maintained by an "Asociación de Padres." FENDIM has been able to obtain from the Ministry of Social Welfare a subsidy for special cases.

Recreation - is available as an adjunct to day and residential schools, but as yet there are few special programs for the adult mentally retarded.

Research - So far the national and provincial governments have not set aside funds for research, with the exception of the Province of Buenos Aires which recently established an Office of Research. However, considerable research has been carried on by physicians, psychologists and educators at institutions of higher learning and at the larger hospitals (see above).

Personnel training - Systematic training of teaching personnel is provided at mostly all national and private universities. There is also systematic training of medical and psychological professionals in mental retardation. Post-graduate courses are offered in some facilities, such as the Children's Hospitals of Buenos Aires and La Plata.

Planning - There has been no specific planning in prevention, although various legislative proposals have been under consideration. A legislative proposal relating to the protection and work of the mentally retarded was recently presented by FENDIM to the Ministries of Labor and Justice.

OTHER INFORMATION FOR VISITORS

Assistance in obtaining information and planning visits can be requested from the following:

Inspección de Pedagogía Diferenciada
Independencia 4248, Buenos Aires

Dirección Técnica General de Asistencia al Escolar
Pizzurno 935, Buenos Aires

FENDIM
Casilla Correo Central 1315, 1000 Buenos Aires

Asociación Argentina para el Estudio Científico de la
Deficiencia Mental
Azcuénaga 1561, Buenos Aires

School holidays - are from approximately December 1 to March 10. A brief winter vacation occurs during the last week of July. The preferable months for visits are April through June, and August through October.

AUSTRALIA

The Commonwealth of Australia comprises a Federation of six States (New South Wales, Victoria, Queensland, South Australia, Western Australia, Tasmania) and two internal territories (the Northern Territory and the Australian Capital Territory). The population is approximately 13.6 million. A high proportion of the population lives in cities.

The land occupies over 7.5 million square kilometers (2,967,892 sq. miles). However, because of a low rainfall pattern large areas of the continent are unsuited to agricultural development and are sparsely populated.

Australia has had large scale programs of assisted migration commencing soon after World War II with the intake of over 100,000 displaced persons. Migration continued from traditional sources, such as the U.K. and Ireland, but has continued to broaden and encompasses settlers on a world wide basis.

Health services are administered mainly by the States although the Commonwealth Government has a role in coordination and in 1975, a universal health insurance scheme administered by the Commonwealth Government was instituted. There are striking variations in mental retardation services from State to State. Education is compulsory in most States for ages 6-16.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Australian Department of Social Security
P.O. Box 1, WODEN,
Canberra, A.C.T. 2606

Australian Department of Health
P.O. Box 100, WODEN,
Canberra, A.C.T. 2606

Australian Department of Employment & Industrial Relations
G.P.O. Box 2817 AA
MELBOURNE, Victoria, 3001

Australian Department of Education
P.O. Box 826, WODEN,
Canberra, A.C.T. 2606

State - There are autonomous State Government Departments of Education, Health, and Mental Health, Welfare or Youth and Community Services, and *Regional*offices of the Australian Departments of Social Security and of Employment and Industrial Relations located in each State with a director in each capital city.

National planning or coordinating body - In 1975, the Australian government established the National Advisory Council for the Handicapped, administered by the Australian Department of Social Security.

State planning bodies - Some state governments have advisory committees on mental retardation or coordinating committees for the handicapped. The Australian Council for the Rehabilitation of the Disabled has established State Liaison Committees for the Handicapped.

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation

Professional

Australian Group for the Scientific Study of Mental Deficiency (AGSOMD)
Hon. Secretary: Mrs. Christine Roylance
P.O. Box 264
Blackwood, S.A., 5051

Founded in 1965, AGSOMD is one of the most active members of the International Association for the Scientific Study of Mental Deficiency, counting nearly 800 members who represent over 20 disciplines. In addition to national conferences, state and territory branches hold regular meetings and seminars.

Citizen

Australian Association for the Mentally Retarded (AAMR)
Hon. Resource Officer: Mrs. N. Rigby
P.O. Box 647
Canberra City, A.C.T. 2601

The Australian Association for the Mentally Retarded, established in 1970 as successor to the 18-year-old Australian Council for the Mentally Retarded, is a member of the International League of Societies for the Mentally Handicapped and represents all but one of the state and territory Associations. The Mentally Retarded Children's Association of Papua (New Guinea) has "corresponding member" status. Other voluntary bodies within Australia which are not state Associations have associative membership. In addition to such goals as mutual support, coordination and stimulation of efforts, and promotion of better public understanding, an important purpose of AAMR is to obtain recognition by the Commonwealth government of mental retardation as a major national problem, and to secure supportive legislation and financial aid. It aims to establish an Australian Institute on Mental Retardation in 1977.

Other national voluntary organizations which include mental retardation

Australian Council for Rehabilitation of Disabled
Cleveland House
Cnr. Bedford & Buckingham Streets
Surrey Hills, N.S.W. 2010

ACROD conducts national seminars and has committees on employment, residential care, recreation and education, as well as other ad hoc committees to deal with specific problems of handicapped people. It has spearheaded the campaign on ACCESS in Australia.

Australian Council of Social Services
P.O. Box N 199
Sydney, N.S.W. 2000

ACOSS is concerned with the total welfare spectrum of handicapped people and their families.

AAMR is a national member organization of both ACROD and ACOSS.

Federation of Autistic Children's Associations of Australia
P.O. Box 18
Chatswood, N.S.W. 2067

Goals similar to those of AAMR with which it has close contact.

Australian Association of Toy Libraries for the Handicapped
28 The Avenue
Windsor, Victoria 3181

Established in 1976 to bring together for mutual benefit all those concerned with toy libraries for the handicapped throughout Australia, this Association also has links with AAMR and its state associations.

PUBLICATIONS

Journals

The Australian Journal of Mental Retardation
Dr. C. Judge, Editor
Children's Cottages, P.O. Box 114
Kew, Victoria 3101

Quarterly journal of the Australian Group for the Scientific Study of Mental Deficiency

AGSOMD Newsletter
Mrs. Christine Roylance, Editor
P.O. Box 264
Blackwood, S.A. 5051

The Australian Medical Journal and the Australian Journal of Psychiatry include occasional articles on mental retardation.

The Exceptional Child (formerly The Slow Learning Child)
Dr. R.J. Andrews, Editor
Fred & Eleanor Schonell Educational Research Center
University of Queensland
St. Lucia, Queensland, 4067

Quarterly publication of Schonell Center

Australian Citizen Limited (formerly Children)
C.H. Watt, Editor
P.O. Box 81
Brighton, S.A. 5048

Quarterly publication of AAMR (began publishing in 1962)

State associations issue newsletters and other publications, some of which have been in existence for many years.

Directories

ACROD has published a computerized national directory of services and organizations for the handicapped. Excellent state directories covering both statutory and voluntary services are available on request from AAMR.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Specialized diagnostic centers can be found in the major cities and in connection with the larger children's hospitals. Such services are less likely to be available in rural areas, although travelling diagnostic teams are now being used much more effectively. Specially trained public health nurses are also being used as a resource for case finding and screening programs. The parents associations have provided a considerable amount of counselling and parent education, increasingly by full-time professional staff. There is still a considerable role for volunteers, but it is a changing role concerned especially with person-to-person service. For example, the Irrabeena Clinic in Perth, founded in 1952 by the Slow Learning Children's Group of Western Australia, is now operating under cooperative state and voluntary auspices.

Education - All State Education Departments provide special schooling for the mildly and moderately retarded with the exception of Queensland where children below the mildly retarded level are provided with educational services by the Queensland Sub-Normal Children's Welfare Association. There are also private schools in all states which receive Commonwealth and State financial support. Most State Education Departments are now extending their services to all handicapped children regardless of severity or degree of handicap. Some integration within neighborhood schools, and more particularly pre-schools, has been achieved for retarded children.

Work training and employment - Work experience programs are being provided from many schools and special classes for mildly and some moderately retarded children of above age 14. Transitional programs are also available between schools, sheltered employment, vocational training "on the job" or in rehabilitation centers. The Commonwealth has provided two experimental "work preparation centers" (in Melbourne and in Sydney) to prepare mildly retarded school leavers for independent living and independent employment. University research teams are now evaluating these centers to provide guidelines for future developments. Community based sheltered workshops provide for the more able handicapped person and Activity Therapy Centers for the less able. Most are multi-diagnostic and aim to provide social training and, where appropriate, a variety of residential accommodations.

Medical care - Regional health teams are now servicing rural centers more effectively and there is usually at least one member of the team with some expertise in mental retardation.

Residential care - Large state institutions of the traditional type can be found in most states, although there is increasing emphasis on developmental activities. Marsden in N.S.W., Strathmont in S.A., Pyrton in W.A. and Colac in Victoria are recently opened residential centers of modern design. Private residential facilities under religious or non-sectarian auspices exist in most states and their relative independence has enabled some to advance beyond the level of the state insitutions; most do not accept the very severely handicapped.

Community residences for adults (hostels) are being established in increasing numbers by the voluntary organizations and include farm hostels, small group homes, boarding houses, semi-independent and independent living with community support services.

Financial assistance - Most of the individual pieces of Commonwealth Legislation referring to handicapped persons were consolidated under the Handicapped Persons (Assistance) Act in 1975. Through social security, cash benefits for maternity, sickness and unemployment, and a variety of other benefits are provided. A family allowance covers children up to 16 years of age and students to age 21; non-means tested but taxable, it is payable to parents whether the child is living at home or in an institution. The Handicapped Child's Allowance of $15 per week is available to parents or guardians caring for the child; it is not subject to a means test and is not treated as income in assessing other social security benefits.

There is no charge to parents for care of their children in state institutions. There is also a non-means tested allowance for parents of children in private residential facilities and nursing homes. Parents from rural areas may be eligible for the Isolated Child Allowance in addition to the above if they have to establish a second home or place the child in a residence in order to obtain appropriate education. The Far West Children's Health Scheme and the Flying Doctor Program have funds to help pay transportation costs which may be considerable for families living in the interior. A disability or Invalid Pension is available after the age of 16 years,and for those working in sheltered workshops a Sheltered Employment Allowance is payable.

In 1967 the Department of Social Services (now "Security") initiated a direct partnership with voluntary organizations in the field of junior training, vocational rehabilitation and residential services. This scheme has assisted the development of services across the nation and the government has steadily increased its financial in-put and advisory services.

While a universal health insurance plan was introduced in 1975, many Australians still belong to private health insurance schemes. All citizens must be covered by one or other form of health insurance.

Recreation - Community recreation for young adults in sheltered workshop programs is still rather limited but widespread adoption of a normalization approach has led to handicapped people being placed in generic recreation programs, e.g.YMCA and community group activities. Some vacation homes and summer programs are available (although these are not so customary for children in Australia as they are in North America and Europe). Many children participate in Scout and Guide troops, in separate or integrated programs. Swimming is an integral part of the retarded child's program from pre-school onwards.

Research - The membership of AGSOMD and its journal attest to the quality of interdisciplinary collaboration in research as well as in practice. Among the centers of mental retardation research activities are the larger children's hospitals in the state capitals (e.g. the Children's Medical Research Foundation, Royal Alexandra Hospital for Children, Sydney and the Royal Children's Hospital in Melbourne); the various specialized diagnostic and assessment centers(such as Grosvenor Hospital in Sydney and Irrabeena in Perth); the Mental Health Research Institute in Melbourne and some research units in residential facilities (e.g. Children's Cottages in Kew, Victoria). Research in these and in university centers has been primarily biologically oriented; behavioral and educational research can be mentioned in the Universities of Queensland and Monash in Victoria, Macquarie University in New South Wales and, more recently, in Colleges of Advanced Education, particularly at Canberra and Torrens, South Austraila.

Personnel training - The majority of disciplines concerned (with the exception of Education) do not provide specialized training in mental retardation. As in most countries, the orientation to mental retardation given in training courses for medical students is still minimal. This situation is improving and some of the major medical centers have specialists in mental retardation. To some extent, seminars and meetings of AAMR, AGSOMD and ACROD help to fill this void.

Three States (Victoria, New South Wales and South Australia) have a 3-year basic nursing training in mental retardation and a 1-year post-graduate course for nurses registered in general or psychiatric nursing. Western Australia is unique in offering a career course for residential care staff not based on a nursing model. Further courses are being initiated in several states for staff working in the sheltered employment, community and child care services including full-time graduate courses in rehabilitation counselling.

Teachers in general are normal teacher-training graduates or kindergarten-prepared and may receive in-service or short term training. Courses in special education at both undergraduate and post-graduate levels are generally available in all states.

Planning - In addition to the National Advisory Council for the Handicapped and State planning bodies mentioned earlier, planning for prevention is evident with wide use of phenylketonuria screening tests at maternity hospitals and well-baby clinics. Amniocentesis is used as a preventive measure and there is a free anti-rubella immunization service. Genetic counselling is available in the major cities.

OTHER INFORMATION FOR VISITORS

Both the Australian Association for the Mentally Retarded and the Australian Group for the Scientific Study of Mental Deficiency will coordinate details and advise on visits. Departments of Education and Health in each state also provide information, as will the Department of Social Security.

School holiday periods - Schools and universities have a three term schedule with holiday periods varying among states by a week or two. The 1st term begins in February and is followed by 2-3 weeks holiday in May; the 2nd term is followed by a 2-3 weeks holiday in August; the 3rd term is followed by 6-weeks summer vacation starting in mid-December.

AUSTRIA

The federal republic of Austria with 7.5 million inhabitants occupies an area of 32,000 square miles in Central Europe. Almost 90 percent of the population is Roman Catholic. The federal republic consists of the semi-autonomous provinces of Burgenland, Kärnten, Niederösterreich, Oberösterreich, Salzburg, Steiermark, Tirol, Vorarlberg and the capital city of Vienna. The language is German. There are 6 universities.

The constitution provides for a parliamentary government. The formal head of State is the President; the executive power is vested in the Chancellor who presides over the Cabinet and is responsible to the bicameral legislature (the Bundesrat and the Nationalrat -- Federal and National Councils). Although most of the governing power, including police power, rests with the federal government, the provinces have considerable responsibility for welfare matters and supervision of local administration. Thus while educational and school legislation is the prerogative of the federal government, the individual provinces have regulatory and administrative power. School is compulsory and free between the ages of 6 and 15. Social legislation is also the prerogative of the federal government. However, public assistance is the responsibility of the provinces and there are some differences from province to province in this respect.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

On the federal level

Bundesministerium für soziale Verwaltung Herr Sektionschef Dr. Karl Ernst Leiter der Sektion IV Stubenring 1, 1010 Wien	Ministry for Social Administration Director of Section IV
Bundesministerium für Gesundheit und Umweltschutz Herr Ministerialrat Dr. Claudius Gerich Abteilung II/7 Stubenring 1, 1011 Wien	Ministry for Health and Environmental Protection Ministerial Counsellor responsible for the mentally handicapped
Bundesministerium für Unterricht Minoritenplatz 5, 1010 Wien	Ministry for Education
Bundesbeirat für Behinderte Vorsitzender: Univ. Prof. Dr. Andreas Rett p.A. Bundesministerium für Gesundheit und Umweltschutz Abteilung II/7 Stubenring 1, 1011 Wien	Federal Council for the Handicapped Chairperson c/o Ministry for Health and Environmental Protection

The Council has an advisory function and is composed of members of the various governmental agencies, clinics and of "Lebenshilfe für Behinderte", the Austrian National Society for the Mentally Handicapped.

fessionals in the field was founded in 1963 by the union of the associations in Vienna, Graz and Klagenfurt, and now has branches in all 7 provinces and the city of Vienna. It is a member of the International League of Societies for the Mentally Handicapped and host/organizer for the ILSMH's seventh world Congress in October, 1978. Annual conferences are held with national fund raising plus widespread information campaigns. Through the branch associations numerous direct services are maintained such as special kindergartens, day care centers, sheltered workshops, residential homes and a residential community for adults.

Others which include mental retardation

Österreichische Caritaszentrale Nibelungenstrasse 1 - 4 1010 Wien	Austrian Caritas Central Organization (Union of Roman Catholic Diocesan Welfare organizations) maintains school and care homes.
Diakonisches Werk für Österreich c/o Prof. Dt. Zerbst, Universität, Wien Dr. Karl Luegerring 1, 1010 Wien	Protestant welfare organization maintains a home for profoundly retarded persons.
Verein zur Einrichtung von Ausbildungsheimen für behinderte und gefährdete Jugend, Erhard-Bartsch Heim "Wurzerhof" 9300 St. Veit/Glan, Kärnten	Anthroposophic association for residential/agricultural training of handicapped and socially endangered youth.
Österreichischer Fürsorge- und Wohlfahrtsverband "Volkshilfe", Wien	Austrian Welfare Association "Volkshilfe"
Österr. Gesellschaft "Rettet das Kind" Pouthongasse 3, 1150 Wien	Austrian "Save the Children" Society
Arbeitsgemeinschaft für Rehabilitation Chiemseehof, 5020 Salzburg	Rehabilitation Council

RESEARCH

Research in both the medical and behavioral aspects of mental retardation is being carried out under leadership of:

Professor Andreas Rett
Ludwig Boltzmann - Institut zur
Erforschung kindlicher Hirnschaden
Abteilung fur entwicklungsgestörte Kinder
Neurologisches Krankenhaus der Stadt
Wien - Rosenhugel
Riedelgasse 5, 1130 Wien

Professor H. Asperger
Universitat Wien
Lazarettgasse 14

PUBLICATIONS

Heilpädogigik	Austrian Council for Curative Education: monthly

On the provincial level

The federal administration offices located in each province have certain sections concerned with social welfare and thus also with the problems of mental welfare services for the retarded.

Other agencies exist on the provincial level which may be concerned with planning as well as with actual provision of services. An example is the:

Arbeitsvereiningung der Sozialhilfeverbände Kärntens p. A. Kärntner Landsregierung Arnulfplatz 1, 9010 Klagenfurt	Coordinating Council of Social Help Organizations in Carinthia c/o Carinthian Federal Office

This agency also includes district and commune membership; in the rehabilitation field it promotes early identification and treatment through examination by specially trained physicians of school children (and many pre-school children), it maintains a special kindergarten with a residential unit for mentally retarded children at Gutenbergstrasse 9, Klagenfurt, and a recreational center for children, including children who are handicapped.

Planning and coordination

National problems of the handicapped are included in the work of the coordinating council for public welfare and child protection services (Arbeitsgemeinschaft für offentliche Fürsorge und Jugendwohlfahrtspflege in Österreich).

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation

Professional

Arbeitsgemeinschaft für Heilpädagogik Präsident: Prof. Dr. H. Asperger Universitäts Kinderklinik Lazarettgasse 14, 1090 Wien	Council for Curative Education

Members of this organization are special school teachers, physicians, psychologists, social workers, child care workers in residential homes, and officials of youth welfare services. It has branches in the provinces and the city of Vienna.

Citizen

Lebenshilfe für Behinderte, Österreichischer Dachverband Rueppgasse 7, 1020 Wien (Telephone 0222/24 71 67)	Austrian National Society for the Mentally Handicapped

This parent sponsored association which is actively supported by pro-

	supplement to the journal Erziehung und Untericht issued by the Ministry of Education
Pädiatrie und Pädologie	Springer Publications Journal, Wien-Berlin
Lebenshilfe	Quarterly journal of the National Association for the Mentally Handicapped

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Early identification takes place mostly through general practitioners and medical specialists through an early identification system known as the "Mutter-Kind-Pass" (mother -child-passport). This requires all mothers, starting with pregnancy, to participate in a system of regular medical assistance. The completion of the mother-child-passport is financially rewarded. Early identification is further facilitated by the fact that 75% of all infants are seen in Mothers' Counselling Services (well-baby clinics). There is no mandatory registration with regard to mental retardation. In the Province of Kärnten a system of consultation and pedagogical guidance for parents of handicapped infants ("Ambulante Erziehungshilfe für das behinderte Kleinkind") with counseling which takes place weekly in the rural districts has been organized by the Verein Lebenshilfe. The counseling service for mothers is supplemented in Kärnten by regular free medical examinations ,especially in the schools.

Early treatment of mentally handicapped children is also available in the following places:

Neurologisches Krankenhaus der Stadt Wien, Rosenhügel
Abteilung für entwicklungsgestörte Kinder
Riedlgasse 5
1130 Wien, Director: Prim. Univ. Prof. Dr. Andreas Rett

Heilpädagogiche Abteilung des Landeskrankenhauses
St. Veiterstarasse 47
9020 Klagenfurt, Director: Prim. Univ. Prof. Dr. Franz Wurst

Kinderstation der Heil - und Pflegeanstalt Graz-Feldhof
Steiermark, Director: Dr. Alois Mievoll

Also in the Heilpädagogischen Abteilungen (Curative Education Divisions) of Pediatric Departments, e.g., in the University Hospital of Vienna, and in the cities of Salzburg, Graz, and Innsbruck.

Education - Since 1966 nine years of elementary school has been compulsory for all children, including mentally retarded children for whom Austria provides 2 types of schooling: the special school for slow learners, and the special school for severely handicapped children. In 1967 there were 103 schools and 1108 classes attached to regular schools, all serving mentally retarded children.

Children with cerebral palsy may be admitted to special schools for the physically handicapped. Most of these are special boarding schools. Special schools for deaf-mute and hard-of-hearing children, for blind, visually handicapped, and those with speech problems have special classes for intellectually handicapped children. In a few cities there are special kindergartens which accept intellectually handicapped children, such as in Vienna and Klagenfurt.

Work training - Most of the work-training centers in Austria have been established and are run by the Lebenshilfe associations. Training centers are functioning in Vienna, Graz (Steiermark), and in the Vorarlberg. The association "Jugend am Werk" also operates an institution near Vienna which includes a sheltered workshop. Centers for therapy as well as work training programs have been established in the Province of Salzburg in cooperation between the "Arbeitsgemeinschaft für Rehabilitation" in Salzburg and "Rettet das Kind" in Oberösterreich. Steiermark has established a training home for all types of handicapped youth at Gratz.

Residential care - In 1977 a total of 22 institutions catered to the mentally retarded child and adolescent. These institutions are supported almost exclusively by private church organizations, the largest number by the Catholic organization Caritas. There exist also State institutions for the retarded, known as Heil-und Pflege-Anstalten (Institutions for Care and Therapy).

Medical care - As yet there are still too few physicians who have specialized in mental retardation and the number of specialists such as pediatricians or neurologists is limited. However school physicians who annually examine all children in schools and kindergartens, frequently find the problem of the mentally retarded child on the agenda of their post graduate training sessions.

Financial assistance - Austria has a family allowance plan which provides increased child benefits which are continued indefinitely if the child is disabled and the person's monthly earnings as an adult do not exceed $27 a month.

Other statutory provisions offer to mentally retarded individuals assistance with education, vocational training, occupational therapy, prostheses and medical treatment. However, lack of funds has put a limit on all this.

Recreation - Recreational programs can be found particularly in the day centers (Sonderhorte) in the larger cities. The association Lebenshilfe in the Steiermark province has vacation programs for retarded children in which mothers can be included and Klagenfurt has provided holiday camping.

Research - Main centers of research are the Children's Hospital of the University of Vienna (Professors Asperger and Thalhammer) and the Ludwig-Boltzmann Institute for Brain Research in the Children's Department, Vienna City Hospital (Professor Rett).

Personnel training - Training of special education teachers is still limited to a 3-months' postgraduate course under sponsorship of the Ministry of Education but extension of this program is under consideration.

Child care workers in residential facilities for mentally retarded children undergo a training program that lasts over a 3-year period and is carried on in special training sessions lasting 2 to 5 days and being sponsored either by local school authorities or child welfare agencies.

Coordination - The Council for public assistance and youth welfare (Arbeitsgemeinschaft für öffentliche Fürsorge und Jugendwohlfahrtspflege) is a joint forum of the Provinces for the purpose of discussion of important problems, exchange of experience and coordination of legal steps in such matters. The chairperson is selected on a rotating basis.

The Executive Council of the national society Lebenshilfe für Behinderte discusses, at its regularly scheduled sessions with representation from all provincial societies, the need for facilities and services for mentally retarded children and adults, provides guidelines and organizational assistance, and confers with governmental agencies on the federal and provincial level.

OTHER INFORMATION FOR VISITORS

Requests for information and assistance in planning visits should be addressed to:

Abteilung IV
Bundesministerium für Soziale Verwaltung
Stubenring 1
1010 Wien

or to any of the governmental agencies listed in this report, or to:

Lebenshilfe für Behinderte,
Österreichischer Dachverband
Rueppgasse 7
1020 Wien
(Telephone 0222/24 71 67).

Summer vacations last in Austria 2 months but the provinces differ as to the beginning and end of the vacation period. The approximate dates are from July 1 to September 10.

BAHAMAS

The island chain of the Bahamas has been independent from Great Britain since 1973, remaining a Commonwealth member. A 5,382 sq. mile archipelago of about 700 islands and 2,000 islets in the west Atlantic, east of Florida and north of Cuba, the Bahamas span 800 miles northwest to southeast. About 20 are inhabited, with an overall population of 215,000 persons, the most important being the 83 sq. mile New Providence on which Nassau, the capital, is located. The people are English speaking, 85% of African descent, and their religions include Baptist (28.8%), Anglican (22.7%), Roman Catholic (22.5%) and Methodist (7.3%). A Prime Minister leads the majority of an elected Assembly, and a Senate is appointed by the Governor General on the advice of the Prime Minister and the "opposition" leader.

The climate is tropical, with an average temperature of 70°F. Tourism is the main industry, and the secondary one is international banking and investment. Other products are citrus fruits, sisal, sponges, crayfish, and rum.

Elementary schools are free and compulsory for 6 to 14 year olds. Secondary education is free at the government high school, and on government scholarships at 3 grant-aided and 3 private denominational schools, all in Nassau. The College of the Bahamas is affilitated with the University of the West Indies.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Education and Culture
Shirley Street, Nassau

Ministry of Labor and National Insurance
Youth Employment Service
Charlotte Street Nassau

Ministry of Health
P.O. Box F.H. 1438, Nassau

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Citizen

Bahamas Association for the Mentally Retarded
P.O. Box N 7003
Nassau

In 1974, this Association incorporated the 1959 established Bahamas Association for Retarded Children (BARC) and the planned Institute for the Mentally Retarded. BARC became an affilitate member of the ILSMH in 1972. The Association is affilitated with the Caribbean Association on Mental Retardation and the Canadian Association for the Mentally Retarded.

Other national voluntary organizations which include mental retardation

Bahamas Council for the Handicapped
P.O. Box N 91
Nassau

This organization aims at coordinating government and voluntary services, stimulating government and public interest, and encouraging legislation for the handicapped.

Bahamas Mental Health Association
P.O. Box F.H. 14383
Nassau

This organization was started in 1966. In addition to its general concerns to improve resources for persons with problems, its family life committee runs a play group integrating handicapped and non-handicapped pre-school children.

PUBLICATIONS

In 1974, the Council for the Handicapped published a Directory of Rehabilitation Services for the Bahamas. The Mental Health Association publishes a journal 3 times yearly which sometimes includes articles on mental retardation.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - The Public Health Nurse of the Community Nursing Service (Ministry of Health) has an important role in prevention, early identification, aid to parents of new-born, and referrals. Diagnostic and assessment services, as well as parent counseling, are provided through the Child and Family Guidance Center in Nassau.

Education - Mildly retarded children are kept in regular schools as long as possible and some special schools are available, such as the special class of the Child and Family Guidance Center (for children on waiting lists or multihandicapped children) and the preschool and kindergarten at the Hopedale Center (private) in Oakes Field. Some children with multiple handicaps attend more than one special school simultaneously, for example, a school for the retarded and a school for the deaf. In 1959, the Bahamas Association developed a special class for retarded children, which was expanded in 1962 into the Stapledon School in Oakes Field; the Ministry of Education and Culture provided some funds. By 1971 the school was serving 78 children. The Ministry continues to provide assistance by funding some teachers' salaries; in 1971, it sponsored 2 teachers to a summer institute held by the Caribbean Association on Mental Retardation.

Recreation - The Association is planning to send participants to the 1979 Special Olympics.

Work training and employment - Abilities Unlimited, affiliated with the Council, runs a sheltered workshop at the Stapledon School. Retarded adults and adolescents can sometimes get employment through the Youth Employment Office of the Ministry of Labor and National Insurance.

Medical care - Medical services for school age children are provided through weekly school visits by visiting nurses. The Sandilands Rehabilitation Center in Nassau, under the Ministry of Health, is a large psychiatric hospital which provides residential services in separate wards for the retarded; in 1972 it was serving 60 retarded people. Its geriatrics hospital also has a ward for severely retarded children.

Personnel training and planning - Training is done on the job or abroad. Planning is done by the Council for the Handicapped and includes architectural design (such as barrier free facilities) and educational public relations programs. One plan is to build a new institute with a hostel, other residential services, and educational services.

OTHER INFORMATION FOR VISITORS

Information can be obtained from

Captain John Fisk, Public Relations Officer
Council for the Handicapped
P.O. Box E.S. 6286
Nassau

as well as the Association (BAMR) c/o Mr. Anthony Hepburn, Secretary.

School holiday periods - Two weeks around Christmas; 2 weeks around Easter; July and August.

BARBADOS

Barbados occupies the easternmost island of the West Indies, about 250 miles northeast of the South America coast, and is almost completely surrounded by coral reefs. The capital is Bridgetown. The population is about 252,000, and the area is 166 sq. miles, making it one of the most densely populated nations in the world. About 90% of the population is of African descent; religions include Anglican (53%), Methodist(9%), Roman Catholic (4%). English is spoken.

The country has been a parliamentary democracy since independence from Great Britain in 1966, with a prime minister, a bicameral legislature (dating from 1627), and universal suffrage. It is a member of the British Commonwealth, the United Nations, and the Organization of American States.

The climate is tropical and the land about 85% arable. Major industries are sugar and sugar products, and tourism. There is free public elementary and secondary technical education, a divinity college, and a free branch of the University of the West Indies in Barbados. The literacy rate is greater than 90%.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Education, Sport and Community Development
Section on Mental Retardation
Bridgetown

Ministry of Health
Bridgetown

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation

Barbados Association for Mentally Retarded Children
c/o The Challenor School
Canefield House
St. Thomas

The Association was started in 1963 and has nearly 300 members (parents, interested individuals, business and professional people). It is a founding member of the Caribbean Association on Mental Retardation and of the Barbados Council for the Handicapped. In 1974 the Association hosted the 3rd Caribbean Conference on Mental Retardation.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

In 1964, the Barbados Association for Mentally Retarded Children and the Rotary Club started the Challenor School for 7 retarded children. By 1973 the school had grown to 63 pupils, 13 of them residents. It is funded by the Association, with some government support (1/4 in 1973) and is staffed by nuns. The school does not accept non-ambulatory children. Pupils are divided into the 7 to 16 year olds, who receive academic training, and the over 16 year olds, who attend a sheltered workshop on the school grounds added by the Lion's Club in 1972. The Association also runs a job placement program for graduates.

In 1973, the Challenor School was the only special school funded by the Ministry of Education, with some mentally retarded children being accepted in regular schools. Following an extended consultative visit of a Swedish special education advisor sponsored by UNESCO in 1974, legislation was enacted which makes the government responsible for the education of all children, including the handicapped.

In 1976, the Barbados government carried out a survey and registration of all the handicapped, sponsored by the International Labor Organization. In the same year, an ILO consultant was appointed to organize vocational programs for handicapped people.

OTHER INFORMATION FOR VISITORS

Requests for information may be made to the Barbados Association for Mentally Retarded Children.

School holiday periods - Usually mid-July through the first week of September; about 3 weeks at Christmas and 2-1/2 weeks at Easter.

BELGIUM

Area - 11,781 sq. miles; population 9.5 million; government - a parliamentary democracy under a constitutional monarch. The official languages are French and Dutch. Geographically and culturally, Belgium is at the crossroads of Europe, divided ethnically today into the French-speaking Walloons in the south, representing 34% of the population, and the Flemings in the north, representing 50%, with the mixed population in Brussels the remaining 16%. The predominant religion is Roman Catholicism. Agriculture accounts for only about 6% of the gross national product in this country, one of the world's densest population and industrial centers with a high standard of living and, until the recent recession, full employment.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ministère de la Santé Publique Cité Administrative de l'Etat Quartier Vésale 20, rue Montagne de l'Oratoire 1010 Bruzelles	Ministry of Health (Responsible for residential institutions - internats)
Ministère de l'Education Nationale Direction de l'Enseignement Spécial Rue Royale 90 1000 Bruxelles	Ministry of Education Special Education Department
Ministère du travail Fonds National de Reclassement Social des Handicapés Rue du Meiboom 14 1000 Bruxelles Mr. Maron, Administrateur-Directeur	Ministry of Labor Fund for social rehabilitation of the handicapped (In charge of rehabilitation assistance and financial help to sheltered workshops - all categories of handicapped persons are included)
Ministère de la Prevoyance Sociale Service des Prestations Familiales et Allocations aux Handicapés Rue de la Vierge Noire 3c 1000 Bruxelles	Ministry of Social Welfare (Gives increased family allowances to families having a handicapped child)
Conseil Supérieur des Handicapés	Special Commission - see page 2

Semi-official agencies

Oeuvre Nationale de l'Enfance
67, Avenue de la Toison d'Or
1060 Bruxelles

National Children's Agency

Subsidized by the State (through the Ministry of Health); activity in mental retardation - case finding through its well baby clinics which reach a great majority of the babies born in the country.

Provincial agencies

Bureau Social de la Province de Namur
Avenue Reine Astrid 22, 5000 Namur

Intercommunale voor Gehandicaptenzorg in Limburg
Stadsomvaart 9, 3500 Hasselt

Provinciale Stichting voor Gehandicaptenzorg - Antwerpen
Koningin Elisabethlei 22, 2000 Antwerpen

Direction de l'Enseignement Special Provincial du Brabant
Rue de l'Hôpital 31, 1000 Bruxelles

Provincie West-Vlaanderen - Dienst Welzijnsbeleid
Koning Leopold III-laan 41, 8200 Brugge

These organizations are subsidized by the provincial governments for the help of all handicapped persons.

National planning body

Conseil Supérieur des Handicapés
3^{c} rue de la Vierge Noire
1000 Bruxelles
President: M. Dillemans

Special Commission on the Handicapped

This Special Commission of the Ministry of Social Welfare was formed to study all social problems of handicapped persons. It includes representatives of the various ministries interested in the handicapped and representatives of private and voluntary bodies working on behalf of all categories of the handicapped.

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation
Professional

Group Belge d'Etude de l'Arriération Mentale
13, rue Forestière
1050 Bruxelles

Belgian Association for the Scientific Study of Mental Deficiency

Affiliated with the International Association for the Scientific Study of Mental Deficiency.

Citizen

Association Nationale d'Aide aux Handicapés Mentaux Nationale Vereniging voor Hulp aan Verstandelijk Gehandicapten 13, rue Forestière B-1050, Bruxelles	National Association for the Mentally Handicapped

Started in 1959 and one of the founding members of the International League of Societies for the Mentally Handicapped, the Association has now a membership of over 6,000 in 30 branches throughout the country. It has promoted changes in social and financial legislation, provided continuous parent counseling and public education, started pilot facilities, and has the official patronage and active interest of Queen Fabiola.

Including mental retardation

Ligue Belge d'Hygiène Mentale Rue Forestière 12 1050 Bruxelles	Belgian Association for Mental Health
Ligue Nationale d'Aide aux Paralysés Cérébraux Chaussée de Vleurgat 94 1050 Bruxelles	(cerebral palsy)
Ligue Nationale Belge contre l'Epilepsie Avenue Albert 135, 1190 Bruxelles	(epilepsy)
Ligue Nationale pour Handicapés Abbaye d'Aulne, 6418 Gozée	National Association for the Handicapped (a federation of a group of institutions)
Fédération des Institutions Spécialisées d'Aide à la Jeunesse Rue Guimard 1 1040 Bruxelles	A member of Caritas Catholica, the Federation is an organization of institutions, most of which are for the mentally retarded
Katholieke Vereniging voor Gehandicapten Nationalestraat 111 2000 Antwerpen	Catholic Association for the Handicapped (working mostly for the physically handicapped)

RESEARCH

Research on various aspects of mental retardation is carried on in all universities (Brussels, Louvain, Ghent, Liège, Mons, Antwerp) but there is no research institute with a major interest in mental retardation.

PUBLICATIONS

The Association Nationale d'Aide aux Handicapés Mentaux publishes a quarterly, *Amentia*, with separate issues in French and Dutch. There is no Belgian professional journal specifically on mental retardation.

Directories - The Ministry of Health issues a stencilled list of institutions, hostels and day centers. The Fund for Social Rehabilitation of the Handicapped (Ministry of Labor) issues a stencilled list of sheltered workshops. The Ministry of Education issues irregularly a stencilled list of special schools and special classes.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Early case finding can be done through the well baby clinics of the "Oeuvre Nationale de l'Enfance," which serves over 80% of all newborns. The program of PKU detection with the Guthrie test is well developed; at least 80% of all newborn babies are tested.

Diagnosis and assessment - There is a fairly good number of clinics for assessment but where not much attention is given to the medical aspect; most are primarily concerned with the mildly retarded. There is a multidisciplinary diagnostic clinic at the University Hospital in Brussels and Louvain University (Department of Pediatrics of the K.U.L.).

Genetic Counseling - Centres de Genetique Humaine:

Institut Bunge
Philip Williotstraat, Berchem
Antwerpen

Service de Génétique
Ecole de santé publique
4, avenue Chapelle aux Champs
1200 Bruxelles

Akademisch Ziekenhuis
De Pintelaan
9000 Gent
Dienst voor Medische Genetika
Blok 1 - eerste verdieping

Kinderkliniek

Centre de génétique
246, Avenue Churchill
1180 Bruxelles

Centrum voor Menselijke
Erfelijkheid
Minderbroederstraat, 12
3000 Leuven

Dr. Koulischer
Allée des Templiers 29 bis
6270 Loverval
Mons-Charleroi

Education - The network of separate, special day schools for the mildly, moderately and severely retarded now is fairly good. A great many children are still educated in private residential schools, but the State pays the salary of one teacher for 12 pupils; tuition is free. A shortage of trained personnel still exists. There are two school systems, the official one and the Catholic one (state supported), plus a very few other private schools.

Work training and employment - There are about 150 vocational training schools but this number is still insufficient. There are now 140 sheltered workshops, either only for mentally retarded persons or for both physically and mentally handicapped persons. The first sheltered workshop for the retarded was created in 1960. No special provision exists for the job placement of the mildly retarded.

Medical care - The great majority of the mentally retarded use the same medical facilities as the other children and adults.

Day centers - There are a few day centers for profoundly or severely multiply handicapped children, and some day centers for adults unable to work in sheltered workshops.

Residential care - There are 100 residential institutions for children, primarily small (rarely exceeding 300 beds), many being boarding schools for mildly retarded children. Some are under provincial authorities but most are private, a large number run by religious orders. The State pays teachers' salaries and 60% of building costs. There are now 53 residential hostels and small institutions for adults, but some 10,000 adults are being taken care of in the general psychiatric institutions.

Financial assistance-increased family allowance to families with a handicapped child; financial state assistance for boarding in institutions; schooling free; compulsory wages in sheltered workshops - 43 B.F. per hr.- State financial assistance is given for this purpose to the workshops; invalidity pension for adults.

Recreation - Leisure time programs have been developed under the impetus of the parent association. There are clubs for retarded men and women, scouting for retarded children, day camps during the summer vacation, and summer camps even for very severely and profoundly retarded children.

Research - There are only small programs primarily carried on by individual scientists in the universities including, in the biochemical field, work on metabolic disorders at the University of Louvain, Ghent, Brussels and Liège. The Human Genetics Centers listed above are also concerned with research. Dr. L. Van Bogaert's work at the Institute Bunge has made Antwerp an international center for neurological research. In addition to the Center for Educational Research at the University of Louvain, there is research in mental retardation in the Department of Psychology at the University of Liège, and in the Department of Orthopedagogy, University of Mons and Louvain (K.U.L.).

OTHER INFORMATION FOR VISITORS

Information can be requested from the Ministry of Foreign Affairs - (Ministère des Affaires Etrangères, 2, rue des Quatre-Bras, Bruxelles 1) and from the National Association for the Mentally Handicapped.

School holidays - December 23 through January 3; generally one week before and one week after Easter; July and August.

BRAZIL

Brazil is the largest nation in South America in population (about 110 million) and in area (3,286,478 square miles - greater than the continental U.S.A.). It is divided into four distinct regions - the underdeveloped tropical basin of the Amazon River, the semi-arid scrub land of the northeast, the agricultural and mineral heartland of the south-central plains and uplands, and the narrow humid southern coastal belt. Brazil possesses innumerable natural resources, but many have not yet been explored.

A Portugese colony until 1822 when independence was proclaimed, Brazil became a Republic in 1889. The government consists of a president and a bicameral congress. A new constitution was adopted in 1967. There are 22 states, 4 territories, and the Federal District of Brasilia. The basic ethnic group is Portuguese, with important and largely assimilated African and some American Indian components. During this century there has been considerable immigration, chiefly to the central and southern regions, from Italy, Spain, Germany and Japan. Despite class differences, national solidarity is strong, with language and religion (Portuguese and Roman Catholic) unifying factors.

Brazil is a country of striking contrasts. The metropolitan areas of São Paulo, with more than 8 million inhabitants, and Rio de Janeiro, with 6 million, have ultra-modern skyscrapers and heavy industry,but in the arid areas of the northeast, with one-third of the country's population, extreme deprivation and, indeed, starvation exists. The large cities attract an increasing immigration resulting in serious economic pressure and the development of vast slum areas (favelas) lacking in schooling and sanitation.

Brazil has a social security program administered by the Ministry of Social Welfare through the National Social Welfare Institute. Coverage for old age, invalidity, death, sickness and maternity is set up under a unified system for all types of workers. Family allowances are to some extent provided through an employment-related system.

Primary education is free and compulsory and is a state, rather than a federal responsibility. Consequently, arrangements for special education vary from state to state.

The movement in favor of the mentally retarded began more than forty years ago with the foundation of the first Pestalozzi Society, concerned with education of all handicapped children. In 1954 the first local Association of Parents and Friends of the Exceptional (APAE) was founded in Rio de Janeiro, followed by others throughout Brazil, now 275 in number.

The laws of 1961, 1964 and 1971 define the rights and services for the mentally retarded to be carried out by the several states. In 1966 the State of São Paulo, for example,created the Special Education Service (followed soon by several other States)to study, plan and execute educational programs for mentally retarded children. Public schools are obliged by this law to have special classes for children below normal intelligence. In 1974 there were 2,362 special education units in Brazil, serving 58,719 mentally retarded children,according to CENESP, the National Center established in 1974 to coordinate organizational and curriculum planning and to stimulate training of teachers for all areas of exceptionality.

Implementation of laws is stimulated, supervised, and to some extent subsidized by the following central government agencies.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministério de Educação e Cultura Centro Nacional de Educação Especial (CENESP) Av. Pasteur, 350 - Botagofo Rio de Janeiro, RJ : Dir. Dra. Sarah Couto Cesar Dir. Geral.	Ministry of Education and Culture National Center for Special Education
Ministério da Saúde Secretaria Nacional de Saúde Divisão Nacional de Educação Sanitaria Esplanada dos Ministérios Bloco 11, 8°, Brasilia D.F. Diretora - Dra. Hortência Hurpia de Hollanda	Ministry of Health National Secretary of Health National Division for Health Education
Divisão Nacional de Saúde Mental Av. Pasteur, 296 Rio de Janeiro, RJ	National Division for Mental Health
Ministério da Previdência Social Instituto Nacional de Previdência Social Av. Presidente Antônio Carlos, 251 Rio de Janeiro, RJ	Ministry of Social Welfare
Fundação Nacional do Bem-Estar do Menor Dr. Mario Altenfelder, Presidente Ministério da Justiça Rio de Janeiro, RJ	National Foundation for Child Welfare

Planning and Coordination

Centro Nacional de Educação Especial (CENESP) (see address above)	National Center for Special Education

On the state level, similar agencies, in cooperation with the education authority (Secretaria de Educação) are concerned with planning and coordination.

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation
Professional

Associação Brasileira para o Estudo Cientifico da Deficiência Mental (ABDM) Rua Itapeva, 490 São Paulo SP Dr. Joelson Amado, Presidente	Brazilian Association for the Scientific Study of Mental Deficiency

Founded in 1965, one of the early active members of the International Association for the Scientific Study of Mental Deficiency, it provides leadership through publications and its annual multi-disciplinary conference. Founder and President, Dr. Stanislau Krynski, has also been President of the IASSMD.

Citizen

Federação Nacional das Associaçãoes de Pais
e Amigos dos Excepcionais
Setor Comercial Sul - Edificio Baracat - 10°/1005
Brasilia DF

The Federation was organized in 1963 and now unites 275 local and state associations; it holds biennial meetings and works closely with the Brazilian Association for the Scientific Study of Mental Deficiency. Since 1966, the Federation has held membership in the International League of Societies for the Mentally Handicapped, hosting Conferences in 1971 & 1974.

Other organizations which include services to the mentally retarded

Sociedade Pestalozzi do Brasil — Pestalozzi Society of Brazil
Rua Visconde de Niteroi, 1450
Rio de Janeiro, RJ

Founded in 1932 in the State of Minas Gerais by Helena Antipoff, a leader in education and agricultural reform, the Society with units in many parts of the country has made a significant leadership contribution in the field of exceptional children in providing services, in teacher training, and in public information. There has been mutual cooperation between the Society and the other organizations concerned with mental retardation.

Sociedade Brasileira de Paralisia Cerebral — Brazilian Society of Cerebral Palsy
Instituto Maria José
Dr. Pinto Duarte, Director
Petrópolis, RJ

Associacão Brasileira de Neuropsiquiatria Infantil — Brazilian Association of Child Neuropsychiatry
Dr. Oswaldo D.M. Loreto, Presidente
Av. Rebouças, 1205
São Paulo SP

RESEARCH

Centro Nacional de Educação Especial (CENESP) — National Center for Special Education
Also under university auspices.

PUBLICATIONS

Revista da ABDM	Brazilian Association for the Scientific Study of Mental Deficiency Journal
Boletim da Sociedade Pestalozzi	Pestalozzi Society Bulletin
Mensagem da Federação Nacional das APAEs	Message - National Federation of APAEs

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis, assessment, consultation to parents- The Ministry of Health, through the National Service of Mental Health (Serviço Nacional de Saúde Mental) is responsible for several children's psychiatric hospitals and mental health out-patient clinics. The national parents association (APAE) and its branches throughout the country provide extensive parent consultation, as do also the Pestalozzi Societies.

Education - All mentally retarded children have the right to special education. There are kindergartens in many parts of Brazil, besides special classes in ordinary schools which are largely limited to slow learners and mildly retarded children. Most of the schools for the moderately retarded are funded under voluntary auspices, such as the Pestalozzi Societies, the APAEs, individual educators or physicians, and are mainly in the urban areas. While real progress in providing services has been made in the last decade, both in the public and private sector, the percentage of retarded children receiving education is still minimal, and indeed it is estimated that perhaps 10% to 20% of all Brazilian children are still without schooling, although complete national statistics are not available.

Work training and employment - As yet there has been a limited development of vocational training and sheltered workshop services, although some pioneering facilities are available, e.g. the APAE program in São Paulo with its 5 satellite centers. SURSEPS (Vocational Rehabilitation Service, Ministry of Social Welfare) promotes the establishment of facilities for evaluation, counselling, training and sheltered work and placement for the disabled in general. Primary concern has been with the physically handicapped, but now includes some mentally retarded.

Medical care - Specialized medical services in the area of mental retardation can be found only in the more highly developed areas. In São Paulo, for example, there is the diagnostic and therapeutic clinic - Clinica de Diagnostico e Terapêutico dos Distúrbios do Disenvolvimento - of the Centro de Habilitação of APAE, and the Pediatrics Department of the São Paulo School of Medicine - Escola Paulista de Medicina (Rua Loefgren, 2249).

Residential care - Besides the traditional overcrowded wards for the mentally retarded in hospitals for the mentally ill, residential care is provided in a limited number of small boarding schools and homes under private auspices, such as the APAEs, the Pestalozzi Societies and private individuals.

Financial assistance - Funds have been made available by the Ministry of Education, through CENESP (see above) for numerous special and ongoing programs. Other financial support comes from various official agencies of the States and, to a limited extent, the universities (for research). The Federation of APAEs depends primarily on public fund raising; the Brazilian Legion of Assistance (Legião Brasileira de Assistência) has been an important source of aid to specific institutions for residential care.

Several Brasilian States have an active relationship with U.S. States through the rehabilitation and education program (PREP) of the Partners of the Americas.

Research - A considerable amount of basic and applied research (primarily biomedical) is carried on under university auspices, e.g. a multi-disciplinary study on Down's syndrome by Escola Paulista de Medicina and São Paulo APAE directed by Dr. Stanislau Krynski. Other research has been conducted at São Paulo APAE and at Faculdade de Medicina de Botucatú (Universidade de São Paulo). CENESP supports research in the education and behavioral fields.

Personnel training - On the state level there are specialized training facilities and programs for teachers, both public and private, as well as for psychiatric social workers, recreational supervisors, and other full-time personnel. The Pestalozzi Societies have pioneered in this field and have also prepared teacher training curricula standards for the Ministry of Education. CENESP undertakes the general coordination of personnel training and plans to train by 1979 a total of 22,000 professionals (including personnel to teach at universities, for government planning, and for administration of state services for the mentally retarded, as well as special teachers). CENESP has published (1975) a statistical survey of teaching and other facilities for the mentally retarded and other handicapped children.

Planning - The governmental agencies are responsible for the planning of educational and care programs for the mentally retarded. The voluntary organizations are active in pressing for extension of services and in providing consultation to official agencies.

OTHER INFORMATION FOR VISITORS

Requests for information and assistance in planning visits can be directed to:

Centro Nacional de Educação Especial (CENESP)
Av. Pasteur, 350 - Botafogo
Rio de Janeiro, RJ

Federação Nacional das Associações de Pais e Amigos
dos Excepcionais (Federação Nacional das APAEs)
Setor Comercial Sul
Edificio Baracat, 10°/1005
Brasilia, DF

Associação Brasileira para o Estudo Científico
da Deficiência Mental (ABDM)
Rua Itapeva, 490
São Paulo, SP

Sociedade Pestalozzi d Brasil
Rua Visconde de Niteroi, 1450
Rio de Janeiro, RJ

School holidays - during Easter Week, the entire months of December and January until mid-February, and the month of July.

BULGARIA

Area - 42,729 sq. miles; population - 8,765,000; government - socialist peoples republic. Ethnically 88% Slavic, with a small Turkish minority, Bulgaria is a predominantly agricultural country with industries confined mostly to domestic markets. However, machinery, tobacco and cigarettes, and a few other products are exported.

The 400-member elected National Assembly appoints the State Council and Council of Ministers. The government, through the Ministry of Public Health, and the Ministry of Labor and Social Welfare, operates extensive pension programs for employed persons and their families, as well as providing medical care for all citizens. Elementary education is free and obligatory from 7 to 14 years of age. There are 21 universities and colleges.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ministry of Public Education
bul. Stambolijsky 18
Sofia

Ministry of Health and Social Welfare
5 pl. Lenin
Sofia

In each district, county and city, the Councils of Public Education are responsible for implementing services, partly dependent on the Ministries listed.

Planning is carried out by the Ministry of Education.

Voluntary organizations specifically concerned with the mentally retarded do not exist, but an organization which includes concern for them is the

Red Cross
u. Biryusov 1
Sofia

RESEARCH

The Section of Psychology and Defectology in the Pedagogical Institute of the Ministry of Public Education is specifically responsible for research in mental retardation. Other governmental research institutes which include the study of mental retardation are

The Scientific Institute of Pediatrics
ul. D. Nestorov, 11
Sofia

The Psychoneurological Institute
Fotrh Kolometer, Sofia 13

Medical Academy Center of Neurology, Psychiatry and Neurosurgery
Blvd. Lenin Sofia 13

PUBLICATIONS

Narodna prosveta
P.O. Box 212
Sofia

Savremena Medizina
pl. Slavejkov, 11
Sofia

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Diagnosis and assessment - is carried out in schools, psychiatric dispensaries and consultation centers for parents and children. Children showing anomalies in their intellectual development are given a medico-pedagogical examination, usually carried out in auxiliary schools for mentally deficient children by a board consisting of the principal of the school, a psychoneurologist and a specialized educator (defectologist).

Medical care - is free in all hospitals and schools. There is an increased emphasis on maternal and child care, genetic counseling, the control of birth injuries, the early diagnosis and treatment of congenital disease affecting the central nervous system, and comprehensive rehabilitation measures; the Academy of Medicine now has a department dealing with mental retardation. Every year about $15 million is spent on such measures.

Education- Auxiliary (special) schools must be provided by the district Councils where there are at least 30 children needing special education, or auxiliary classes in ordinary schools where there are at least 8 such children. Children living in places where there are no auxiliary classes are sent to boarding homes attached to auxiliary schools. In general, borderline cases attend "temporary classes," mildly retarded (debiles) go to auxiliary schools, moderately and some severely retarded children are educated in special institutions. Preschool age retarded children are sent to special kindergartens. Each auxiliary school has a parents' committee, with the aim of enlisting the collaboration of the family by giving parents the necessary educational information.

Work training and employment - Auxiliary schools provide basic elementary vocational training in manual work. In boarding schools in rural areas, agricultural training is stressed. Pupils leaving auxiliary schools may be admitted to special enterprises organized by the Ministry of Health and Social Welfare.

Residential care - As noted above, boarding homes are attached to some auxiliary schools for the mildly retarded. The special institutions for the moderately retarded and sheltered homes for the severely retarded are under the direction of the Ministry of Health and Social Welfare. To the extent possible, emphasis is put on work training.

Financial assistance - Every mentally retarded individual over 16 years of age receives an allowance.

Research - Under the direction of Dr. L.K. Timcev, neuropsychiatrist, Medical Academy, extensive statistical, epidemiological, clinical, sociological and etiological studies in mental retardation have been carried out. A summary in Russian and English is available.

Personnel training - Until 1959, teachers for the auxiliary schools were trained in a teachers' training college (2-year study after the secondary school) where they specialized in the education of mentally retarded children. They now take a 4-year university level course at the Pedagogical Department, University of Sofia, where psychologists also have special training in the field. The salaries of special teachers and supervisors are 15% higher than in the ordinary schools.

Planning - is done on the national level.

OTHER INFORMATION FOR VISITORS

The Committee of Friendship and Cultural Relations (bul. Dondoukov, Sofia) arranges visits on the basis of cultural agreements with various countries. Further information is available also from the Departments of Cultural Relations in the Ministry of Education and the Ministry of Health and Social Welfare.

School holidays - from the 1st of July until the 15th of September.

CANADA

Area - 3,851,809 square miles; population - 22,446,000; government - parliamentary confederation of 10 provincial governments, an independent member of the British Commonwealth. The two territories, Yukon and Northwest, administered by a Commissioner and elected Council, consist of 40% of the land with about 0.2% of the population. Most Canadians live within 200 miles of the southern border; about 44% are of British descent and 30% of French descent, the latter concentrated mainly in the Province of Quebec. Manufacturing, mining, agriculture, fishing and forestry are the main occupations, the first having expanded so rapidly during the past three decades that the nation can now be considered primarily an industrial urban society.

Recent developments in comprehensive social welfare planning include compulsory old-age, unemployment, disability and survivors insurance, family and other social allowances, hospital and health care, with responsibility generally shared between the Provinces and the Federal Government.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Department of National Health and Welfare, Ottawa

Department of Manpower and Immigration, Ottawa

Each of the 10 Provincial Governments provides services for the mentally retarded under such departments as the following:

Department of Education
Department of Public Health
Department of Social Welfare

The Federal Government provides financial aid to the Provinces but in general does not administer health or welfare services, and has no jurisdiction in the education area.

National planning or coordinating body - There is no one national govenmental planning and coordination body for mental retardation. However, under the aegis of the Department of National Health and Welfare, there are advisory councils and committees (on mental health, maternal, child health, day care, etc.) which are charged with coordination and planning on the Federal Provincial level.

The Canadian Association for the Mentally Retarded in many respects acts as a planning and coordinating body. It has advisory bodies with representatives from Provincial and Federal Governments on various committees. CAMR's provincial divisions likewise coordinate their work with provincial governments. The National Institute on Mental Retardation (NIMR) shares the CAMR headquarters on the York University campos in Downsview (Toronto). NIMR is sponsored by CAMR with voluntary and government support; it serves as a central hub for program development, personnel training, public education and research in this field.

A French language institute affiliated with the Québec Association is located on the campus of the University of Québec in Montreal: Institut Québecois de la Déficience Mentale, 355 ouest, rue Ste-Catherine, case postale 8888, Montréal, Québec H3B 3J1.

VOLUNTARY ORGANIZATIONS

Primary concern in mental retardation

Professional and citizen

Canadian Association for the Mentally Retarded
4700 Keele Street
Downsview (Toronto) Ontario M3J 1P3

CAMR is a federation of 10 Provincial Associations, each with its own officers, board of directors, professional advisory council and honorary governors. CAMR's national officers, directors, professional advisors and honorary governors are drawn from all parts of the country and act for the Provincial Associations in dealing with the Federal Government and other national matters. Approximately 48,000 members (parents of the retarded, interested citizens and professional workers) are united in the 378 local branches (AMRs). CAMR joined the ILSMH in 1963, and was host/organizer of its Fifth World Congress,held in Montreal, 1972.

Individual

Many workers in mental retardation belong to the American Association on Mental Deficiency and the Canadian Committee, Council for Exceptional Children, National Education Association (U.S.A.). Canadian scientists represent Canada in the International Association for the Scientific Study of Mental Deficiency.

Other organizations which include mental retardation

On an informal basis, certain other national organizations include mental retardation in the same way that CAMR serves multiple handicaps in its program. CAMR joined forces with five other national bodies to form the Joint Commission on Emotional and Learning Disorders in Children, whose report was published in 1969. These are:

- Canadian Council on Social Development
- Canadian Committee on Children and Youth
- Canadian Mental Health Association
- Canadian Rehabilitation Council for the Disabled

RESEARCH

The Department of National Health and Welfare makes available a number of grant funds for research in mental retardation, as do also the Medical Research Council and a number of private foundations. Research relating directly or indirectly to mental retardation is carried out in many universities; increasing attention is being devoted to psycho-social aspects, in contrast to an earlier concentration on bio-medical areas.

CAMR, together with its provincial associations and also some of the larger local units, has supported research studies by provision of bursaries to graduate students as well as by direct assistance to research programs. A National Crusade fundraising drive, conducted by CAMR to mark Canada's 1967 Centennial, resulted in a greatly increased emphasis on research developments. Of the 14 research and demonstration projects sponsored by the Crusade, the following have maintained a specific research involvement:

British Columbia Mental Retardation Institute
University of British Columbia, Vancouver, B.C.
(Six research teaching chairs in six faculties; an Institute building was opened in 1976)

Institute for the Study of Mental Retardation
University of Alberta, Edmonton, Alberta
(Interdisciplinary research in learning processes and teaching methods)

Alvin Buckwold Mental Retardation Unit
University Hospital, University of Saskatchewan
Saskatoon, Saskatchewan
(Research, teaching and consultative services, particularly in parent counselling, early infant stimulation, prevention)

Atlantic Research Center for Mental Retardation
Dalhousie University, Halifax, Nova Scotia
(Detection and prevention research)

L'Institut Québecois de la Déficience Mentale
Université de Québec à Montréal

National Institute on Mental Retardation
Kinsmen Building, York University Campus
Downsview, Ontario

These last two are technical/professional entities concerned with research, training, consultation and program planning in mental retardation and related disabilities. The comprehensive library at NIMR has been designated a collaborating information resource center for English language materials by the International League of Societies for the Mentally Handicapped.

PUBLICATIONS

Journals

Déficience Mentale / Mental Retardation
Bilingual quarterly publication of CAMR

The Reporter
Quarterly newspaper (bilingual) for CAMR members

Canada's Mental Health (includes mental retardation)
Department of National Health and Welfare, Ottawa

Directories

Individual provinces have, at times, produced directories; many local mental retardation organizations have directories of their own services. CAMR keeps information on services but does not publish a formal master document. The Canadian Department of Manpower and Immigration, Ottawa, publishes an annual Directory of Workshops in Canada Serving the Handicapped, which includes listings of workshops and activity centers serving retarded adults.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents - is provided through the established health, welfare and education services such as mental health clinics, educational diagnostic services and a growing number of specialized centers in most parts of the country. Quantity and quality of sources is steadily improving, and more attention is being paid to genetic counselling. A registry of handicapped persons, including the mentally retarded, has been maintained since 1952 by the British Columbia Department of Health Services, Vancouver, B.C.

Education - Mildly retarded children are educated in the regular public school system. To an increasing extent, they are being included in regular classes, with the support of special education consultants. In many rural areas, itinerant auxiliary teachers are functioning. The school-work training concept is gaining momentum for moderately as well as mildly retarded children.

Moderately retarded children are provided for in special classes and schools, originally segregated from public school facilities, but increasingly located within regular schools. Most are operated by public education departments but some still by local branches of CAMR. Almost all receive full public support. Some modified technical trade schools are being developed (including some experimental projects) in this field, and some jurisdictions allow retarded pupils to remain within the public system until the age of 21. The trend is to include developmental classes for the severely handicapped within public schools, but mandatory education for all children has not yet been fully implemented in any Province.

Pre-schools for retarded children have been operated by AMRs for more than 10 years, and are being recognized as an essential service. They receive some government support through day care funding. An increasing number of AMRs and government assessment and counselling clinics offer training to parents (often in their own homes) in early stimulation techniques for infants showing a developmental lag.

Work training and employment - The provincial rehabilitation services with the help of the Federal Manpower Department provide work training for any handicapped person able to realize "substantially gainful employment" as a result of training. The employment division of the Federal Manpower Department employs special consultants in its offices throughout the country to assist in the placement of such handicapped persons. Training of the moderately retarded is still largely the responsibility of the voluntary organizations, with partial Government support. Much of the training is done through the approximately 250 sheltered workshops and activity centers operated by local AMRs, serving over 8,000 clients. Three of the Crusade projects work specifically in this area: Industrial Research and Training Center for the Retarded (Edmonton, Alberta); Vocational and Rehabilitation Research Institute (Calgary, Alberta); Employment Training Center (Toronto, Ontario).

Medical care - Canada maintains a high quality public health service. There is a universal hospital and medical care insurance scheme backed by Government funds. While increasing attention and concern is evident within the medical profession, particularly among the more recent graduates, it is difficult to determine the level of medical care and counselling which parents receive from doctors and public health nurses, particularly in smaller centers.

Residential care- There are about 90 provincial and private residential institutions, with approximately 19,000 residents of all ages; only two have a capacity of over 1,500 beds; more than half serve less than 100. The large institutional programs are undergoing major change by way of architectural modifications, improved staffing, programming, etc. There is a growing emphasis on small regional residential units or small specialized group homes, or foster care for the severely and profoundly retarded, with group homes, foster homes and supervised independent living arrangements for the moderately retarded. Community-based residential programs are usually operated by AMRs or other non-profit organizations with significant support from Government funding. One of the largest provinces, Ontario, provides up to $15,000 per bed for small group homes toward construction costs, and 80% of operating costs. The small group home with 15 or fewer residents is proving to be a major device in keeping retarded people in their local communities. In 1965 there were 5 such houses in Canada; by 1975 the number had increased to over 200.

Financial assistance - Federal agencies and provincial governments support programs providing services for the retarded, although the present level of assistance is still insufficient to enable provision of optimal community-based services. Retarded adults incapable of self-support are eligible for disability pensions through national Family Benefits legislation.

Recreation - Most local AMRs provide recreation services covering a range of activities including summer camps in most regions of the country. The current trend is to promote the integration of handicapped persons into community recreation programs. In 1974, the Federal Government funded an Inter-Agency Recreation Project which is actively promoting the right of all handicapped persons to enjoy the same leisure experiences as are available to the general public, and a number of educational resources have been developed for recreation professionals and the general public. Participating agencies are CAMR, the Canadian Mental Health Association, the Canadian National Institute for the Blind, and the Canadian Rehabilitation Council for the Disabled.

Research - CAMR's 5-year National Crusade generated an estimated $25,000,000 with support coming from Governments, industry, universities and the general public. The Crusade stimulated increased interest in other on-going bio-medical and behavioral studies at universities. CAMR is currently involved in developing provincial experimental projects to investigate and demonstrate the validity of comprehensive community-based service systems for retarded people of all ages and degrees of handicap. Future research plans include a stronger concentration on prevention in all its forms, including the identification and early stimulation of handicapped infants.

Personnel training - Most teachers of special classes have had extra training, but it is not a pre-requisite in all the provinces. Many community colleges offer 2-year post-secondary courses which train workers for such areas as early childhood education, recreation, vocational and residential services for retarded people. Increased opportunities are available for advanced training in mental retardation for doctors, social workers, psychologists, teachers, etc. More than 5,000 people have attended NIMR's intensive short-term courses for volunteers, front-line workers and administrators in mental retardation services.

Planning - Extensive long range planning is being carried on in the mental retardation divisions of Provincial governments, in partnership with CAMR and its provincial affiliates. See also previous references to NIMR. In cooperation with the federal and some provincial governments CAMR has launched as its "Plan for the '70's" the development of experimental and demonstration regions of comprehensive community service systems (ComServ). The first two ComServ projects have been started in Alberta and Québec.

OTHER INFORMATION FOR VISITORS

Inquiries can be directed to the Department of National Health and Welfare in Ottawa, to the provincial government departments, or to the Canadian Association for the Mentally Retarded. Individuals or groups planning to visit Canada should specify the areas of interest and the time available in order to plan the most appropriate and efficient study tour. Canada's 22 million people are spread over a land area the size of the United States or approximately the size of Europe. Although Canada's Immigration Act is under revision, families with a retarded dependent may still experience difficulty in entering the country. It is advisable to confer with the Department of Manpower and Immigration in Ottawa.

School holidays - From the end of June to the first Tuesday in September and the usual Easter and Christmas holidays.

UNITED REPUBLIC OF CAMEROON

(RÉPUBLIQUE UNIE DU CAMEROUN)

The United Republic of Cameroon, occupying 183,568 square miles on the west coast of Africa on the Gulf of Guinea, has an ethnically diverse population of 6,400,000. Employment in this planned economy is primarily agricultural, with aluminum processing being the most important industry. The official languages are English (in the east) and French (in the west).

In 1960, East Cameroon, formerly the French republic of Cameroun, and West Cameroon, previously British Southern Cameroons, joined as two states under one federal republic and, in 1961, adopted a Constitution with Yaoundé the capital city. In 1972 the States were joined as a united republic. A president, vice president and a national assembly are elected by direct, universal suffrage. The President appoints the Prime Ministers of the two States, who must then be confirmed by a simple majority of the State Legislatures. The national government has exclusive jurisdiction in developmental planning, economic planning, higher education, and social services, while primary education is under the States.

The States have separate educational systems and government aided missionary schools are more numerous than public schools. Most children in the south attend elementary school, but only about 10% in the north do so. Some go on to secondary school or institutions of higher learning in Cameroon or abroad. Yaoundé has a unversity which serves Cameroon and equatorial Africa.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ministère de la Santé et de l'Assistance Publique Service de la Santé Mentale Yaoundé	Ministry of Health and Public Assistance Mental Health Service

This is the national planning body.

Ministère des Affaires Sociales Yaoundé	Ministry of Social Affairs

Semi-official agencies

Centre-Jamot Yaoundé	The Jamot Center

This Center operates under the Ministry of Health and Public Assistance, and serves mildly, moderately and severely retarded persons.

Le Centre Universitaire des Sciences de la Santé (CUSS) Faculté médecine de Yaoundé Université de Yaoundé Yaoundé	University Center for Health Sciences

VOLUNTARY ORGANIZATIONS

Including mental retardation
Citizen and professional

Association des Parents d'Enfants Handicapés (APEH) B.P. 1298 Yaoundé	Association of Parents of Handicapped Children

This local organization, established in 1970, intends to branch out into the main cities, and works under the regulations of the two Ministries. It has been an affiliate member of the League since 1973.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Mentally retarded children are not institutionalized because they have been traditionally accepted in their local communities and "kinship systems." The government gives some funding to the existing services available in the larger cities. Usually services include not only the retarded but others with various physical, emotional or mental handicaps.

Early case finding is done by the parents' association, schools, or local social service and health organizations. Referrals are then made to special schools at the Centre-Jamot, l'hôpital Central, and l'Externat-Médico-Pédagogique "La Colombe." These agencies provide diagnosis and assessment, consultation to parents, work training, and medical, recreation and educational services. "La Colombe," opened in 1972 and operated by the parents' association, serves about 120;4 through 15 year olds who have various mental, emotional and physical handicaps; there is emphasis both on academic and work training.

The Centre Universitaire des Sciences de la Santé and the Ecole Nationale d'Educateurs et Assistants Sociaux (in Bétamba) provide personnel training.

OTHER INFORMATION FOR VISITORS

This can be asked from:

Monsieur le Ministère de la Santé et de l'Assistance Publique
Yaoundé

Mme le Ministère des Affaires Sociales
Yaoundé

Mr. Le Professeur Makang Ma Mbog
Centre-Jamot, Yaoundé

Mme Félicité Assoumou, Présidente, l'APEH
B.P. 1298, Yaoundé

School holiday periods - July through September; 2 weeks end of December and early January.

CHILE

The Republic of Chile lies along the southwest coast of South America, between the High Andes mountains and the South Pacific, a 286,396 square mile strip of land mainly in the temperate zone, reaching 2,620 miles from its northern desert to Tierra del Fuego at the southernmost tip of the continent. Chile gained independence from Spain in 1817. Its constitution provides for election of a president and bicameral legislature by direct popular vote but since September 1973 the country has been governed by a military junta.

The population is about 10 million with an estimated two thirds of mixed Spanish and Indian descent. The language is Spanish and the Roman Catholic church is dominant but not state supported. The economy is mixed agricultural and industrial; the country ranks as one of the largest producers of copper and nitrate. Santiago, the capital city, has over 3 million people.

Chile has been considered one of the more socially progressive countries in Latin America -- it had the first South American school of social work, for example. While it has a comprehensive plan of social insurance there are still great gaps in income distribution, with a large number of people living below subsistence level. As in other South American countries, the urban areas have attracted far more migrants than can be absorbed, resulting in large slum areas mushrooming around the cities.

Education is free and compulsory between the ages of 7 and 17. A substantial number of children, in fact, leave school to work long before age 15. In some urban areas pre-schools have been in existence many years but serve only a small percent of the 3 to 6 age group. The wife of President Pinochet has been given responsibility to find solutions to this problem and many new kindergartens are being established.

Although progressive in other health and welfare areas, Chile was somewhat slow moving in the field of mental retardation, even though the first public special school for retarded children was founded in 1928 in Santiago. Progress in the 1960's can be ascribed to a considerable extent to the initiative of an individual parent of a retarded child, resulting in action in both the voluntary and public sectors. This in turn led to the establishment in 1965 of a government coordinating commission to study the entire field.

In 1974, following the government change, overall responsibility was given to the Corporation to Aid the Mentally Deficient (the name was changed later to "Corporación de Ayuda al Niño Limitado"), directed by Mrs. Margarita Riofrío de Merino, wife of Admiral Merino, assisted by the wives of other members of the Government Junta, with a professional staff and technical advisors from the Ministries and Universities.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministerio de Educación Publica	Ministry of Public Education
Av. Bernardo O'Higgins 1371 Santiago	
Dirección Primaria y Normal Sección Educación Especial	Department of Elementary Education and Teacher Training Special Education Section
Servicio Nacional de Salud	National Health Service
Calle Monjitas 665 Santiago	Sections on:
Sección Materno y Infantil	Maternal and Child Health
Sección de Recuperación	Rehabilitation
Sección Salud Mental	Mental Health

PLANNING AND COORDINATION

Corporación de Ayuda al Niño Limitado (COANIL) Julio Prado 1761 Santiago	Association to Aid the Retarded Child

The Corporación de Ayuda al Niño Limitado, established by Government Decrees of November, 1975 and October, 1976, is registered as a private entity "to unify and expand the work of the various Ministries and Institutions concerned with the problem of the limited child." A comprehensive study had been prepared in 1975 by a national commission headed by Mrs. Merino, with the collaboration of the Universities, Ministries and other technical advisors. One of the main recommendations concerned the need to give immediate and special attention to the many children considered mentally retarded because of socio-economic and cultural deprivation. In 1976 COANIL opened 2 comprehensive treatment centers; others are planned which will include residential care. Other functions of COANIL include education of the general public and parent education for economic and socially deprived families. A prevention campaign emphasizing early stimulation includes an international seminar on psychosocial stimulation of babies and pre-school children, sponsored by the Interamerican Children's Institute.

VOLUNTARY ORGANIZATIONS

Professional

Asociación Nacional de Especialistas en Educación de Deficientes Mentales	National Association of Special Education Teachers of the Mentally Retarded

Citizen

Fundación Leopoldo Donnebaum Av. Pedro de Valdivia 176 Casilla 3058, Santiago	Established in 1961; has demonstrated educational, vocational, sheltered work and group home services, plus personnel training.

Asociación de la Corporación Escuela
Especial España
Casilla 65, Talca

An association of parents and professionals providing education and work training on a regional level.

The Fundación and the Asociación have been members of the International League of Societies for the Mentally Handicapped since 1968 and 1974.

RESEARCH

Professor Jean Cizaletti Dureaux
Director
Departamento de Educación Diferencial
Universidad de Chile
Sede Santiago Oriente

Marta Colombo Campbell
Investigador
Departamento Nutrición
Universidad de Chile
Sede Santiago Sur

PUBLICATIONS

El Niño Limitado - bimonthly journal began publication in 1968 under sponsorship of the Fundación Donnebaum; given over to the Ministry of Education in 1974.

Informe de la Comisión Nacional de Estudio de la Deficiencia Mental - Report of the National Study Commission on Mental Deficiency, Santiago, University of Chile, 1975.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Case finding and diagnostic services are available through the clinics of the National Health Service and through various hospitals. Parent counselling has been provided in these centers and in the special schools.

Education - The Escuela Especial de Desarrollo in La Reina, Santiago was started in 1928 by the Ministry of Education and for years was the only such school. Since 1965 however, the number of special schools has more than tripled; in 1974 there were 95 (45 in the metropolitan area of Santiago) serving children with different handicaps. The majority were for mentally retarded children (73), 27 also having children with specific learning difficulties or other handicaps. Schools under private auspices, some organized by parents, generally serve the more handicapped child.

Work training and employment - The Escuela Especial de Desarrollo has a large and varied vocational training program for 420 young people, 120 of whom are boarding pupils. Job placements are arranged by the school's social workers. The Escuela de Recuperación of the Fundación Donnebaum has pioneered by including the more severely retarded young people in its vocational training and, by the use of modern techniques, its sheltered workshop has a surprisingly successful financial level of production in silk screening, photoengraving, lacquer, assembly and carpenter work, and dress making.

Medical services - In general, specialized medical care is obtainable only in Santiago. The National Health Service and COANIL are interested in prevention and the care of mothers and infants at risk, which may result in more awareness on the part of general practitioners as to responsibility for prevention and treatment.

Residential care - Facilities are limited. Aside from the boarding section of the Escuela Especial de Desarrollo, there are only a few facilities for children or adults, under the National Health Service, and a few private homes. COANIL plans to open a children's residential treatment home.

Personnel training - A far reaching contribution of the Fundación Donnebaum has been the impetus it gave to the establishment of a university based teacher training program of high quality, under the direction of the Psychology Department of the University of Chile. The specialized training of (already certified) teachers takes place in a building donated by the Fundación with classroom observation and practice teaching in the adjoining school of the Fundación. About 65 receive training each year.

Research - Epidemiological, clinical and biological research in the field of nutrition and mental retardation have been carried out in the pediatrics departments of the University of Chile and of Catholic University, in connection with the World Health Organization. Experimental studies on the use of DMSO have not proven conclusive.

OTHER INFORMATION FOR VISITORS

Assistance in planning visits can be requested from:

Corporación de Ayuda al Niño Limitado
Julio Prado 1761
Santiago

School holidays - In Chile schools are closed between December 15th and March 15th. The winter vacation usually occurs during the second and third weeks in July.

REPUBLIC OF CHINA

(TAIWAN/FORMOSA)

Taiwan (area - 13,886 sq. miles), the seat of the Government of the Republic of China since 1949, is an island located 90 miles off the southeast coast of mainland China. A range of mountains forms the backbone of the island of Taiwan (Formosa), the western slope being fertile and well cultivated. The economy is based on agriculture, forestry and light industry.

Partly due to the mass influx of population from mainland China around 1950, as well as the high birth rate and reduced infant mortality rate, the population has doubled in the last 25 years to about 16 million. Approximately 150,000 are believed to be descended from tribes that migrated from the Philippines; most have come over the past 300 years from mainland China, and nearly every Chinese dialect is represented on the island. The capital city is Taipei, near the northern tip of the island.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Chiau-yu Pu 5, South Chung Shan Road Taipei 100	Ministry of Education
Kuo-min Chiau-yu Shi	Department of Elementary Education
Chung-ten Chiau-yu Shi	Department of Secondary Education
Sho-hoi Chiau-yu Shi	Department of Social Education

Other agencies with primary concern in mental retardation

Taipei Children's Mental Health Center
Department of Neurology and Psychiatry
National Taiwan University Hospital
No. 1,Chang-Te Street, Taipei 100
Chen-chin Hsu, M.D., Director

This is the main professional agency which, in addition to its routine function, has been actively involved in the planning and establishing of special education for the mentally retarded at the beginning.

Citizen

Taipei Association of Mental Retardation
67 Kung-kwan Rd.
Taipei, Taiwan

The Taipei Association was organized by a group of pediatricians and parents of retarded children in 1971. It sponsors a center for moderately and severely retarded children.

Others which include mental retardation

Chinese Association of Special Education
c/o Special Education Center
College of Education
National Taiwan Normal University
Taipei, Taiwan

Catholic Activities Center
197 Kaishan Rd.
Tainan, Taiwan

Several day care centers have been opened by Catholic groups.

RESEARCH

Graduate Institute of Education
National Taiwan Normal University
Roosevelt Rd. Section 5, Taipei, Taiwan

Special Education Center
National Taiwan Normal University
Ho-Ping East Rd., Taipei, Taiwan

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents - Starting in 1960, in-serving training was carried on to equip classroom teachers, public health and mother-child health workers with knowledge and skills in case finding.

Education - The first special class for the mentally retarded at the primary level was initiated in a public elementary school in 1962. The first at the secondary level was established in 1970. The total number of special classes for the mentally retarded at the primary level is 70; at secondary level now 42. Plans are being made to increase the number of classes every year. The first special school for mentally retarded children is being established in the southern part of the island. The Ministry of Education recently completed a national census study of exceptional children between the ages of 6 and 12. With a population of 2.35 million 16,771 were diagnosed as mentally retarded (including 3,000 described as of "borderline" intelligence).

Four major educational acts and statutes have been passed between 1968 and 1975 which have made significant contributions to the development of special education programs in the country.

Medical care - So far no medical unit has been set up specifically for the mentally retarded. Most patients receive medical care from private physicians.

Personnel training - The provincial Taipei Normal College offers 1-year full-time training programs for teachers to teach classes for the mentally retarded at the primary level. The Graduate Institute of Education and the Special Education Center at the National Taiwan Normal University offer pre-service or in-service training programs for teachers of classes for the mentally retarded at the secondary level, as does the Department of Special Education at Taiwan Provincial Changhwa College.

Research - Staff members of the Departments of Education, Psychology and Psychiatry of universities have been publishing their research studies on mental retardation in such journals as the Chinese Journal of Psychological Testing, Chinese Journal of Guidance, and Acta Pediatrica Sinica.

Residential care - All residential centers for the moderately and profoundly retarded are private organizations. Three are located in the northern part and one in the central part of the island.

Work training and employment- The Good-will Industry (c/o Mrs. A-mi Yao Director, Dept. of Social Work, National Taiwan University Hospital, Taipei) and the day care program offer work training; classes for the mentally retarded at the secondary school level also offer vocational training programs.

OTHER INFORMATION FOR VISITORS

Requests for information may be directed to:

Special Education Center
National Taiwan Normal University
Ho-Pin East Road, Taipei, Taiwan
Republic of China

Dr. Chen-chin Hsu, Director
Taipei Children's Mental Health Center
No. 1, Chang-te Street
Taipei, Taiwan
Republic of China

School holidays - The school system is quite similar to that of the U.S.A. The first semester begins in September and ends in January, and the second semester begins toward the end of February and terminates in early July.

COLOMBIA

Colombia is a republic on the northwest corner of South America, and is the only South American country with coasts on both the Atlantic Ocean and Caribbean Sea; its capital is Bogotá. It is the fourth largest republic in South America, having an area of 439,735 square miles and a population of 24,190,000 persons. The population is 68% mestizo, 20% white, 7% Indian, and 5% black; it is Spanish speaking and Roman Catholic.

The government has a President, Cabinet and a bicameral, elected legislature. The President appoints the Governors of the 22 Departments (geographic regions) and they, in turn, appoint mayors of municipalities. The governor has absolute veto over the elected Department legislatures.

More than 98% of the population lives in the highlands of the Andes Mountains in the western two-fifths of the country. The three-fifths of the country east of the Andes consists of grassland, rain forest and lowlands. The highlands have frequent, light rains, springlike temperatures, and generally two dry seasons, December through February and June through August, while the lowlands are hotter and more humid. Most people's income is derived from farming and cattle herding, although only a small part of the land is cultivated; coffee is a principal crop. Colombia has the third largest oil industry in Latin America, as well as platinum and emeralds. There is also manufacturing such as textiles, and forestry (vanilla, quinine).

Social welfare has formally been a government responsibility since 1936, but the private sector and agencies such as the United Nations have responsibility for some welfare programs. A social insurance system covers some workers for certain medical and pension benefits. The literacy rate is about 60%; the government supports primary and secondary education, although not in all areas of the country. The major government educational funding goes to the universities, of which 12 are public and 11 are private.

Responsibility on the governmental level for mental retardation and other handicaps was vested in the three agencies listed below, all created by law in December 1968. Financial resources to aid the programs are given to the Colombian Institute of Family Welfare; the Division of Special Education and the National Rehabilitation Council advise on the organization of training courses for specialized teachers and instructors, and on the technical and planning aspects of the programs.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry:

Ministerio de Educación Nacional División Educación Especial y Preescolar Helena Manrique, Director Centro Administrativo Nacional (CAN) Bogotá, D.E.	National Ministry of Education Division of Special and Preschool Education

Semi-governmental:

Instituto Colombiano de Bienestar Familiar (ICBF) Apartado Aereo 18116 Bogotá D.E.	Colombian Institute of Family Welfare
Consejo Nacional de Rehabilitación Bogotá D.E.	National Rehabilitation Council

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation -

professional:

Asociación Colombiana para el Estudio Científico de la Deficiencia Mental Carrera 40 No. 24-25 Bogotá, D.E.	Colombian Association for the Scientific Study of Mental Deficiency Founded 1974

citizen:

Asociación Colombiana Pro-Nino Retardo Mental (ACONIR) Apartado Aereo 21-520 Calle 79, No. 9-77 Bogotá D.E.	Colombian Association for Retarded Children Founded 1963
Asociación de Padres y Amigos de Niños Excepcionales del Atlantico (APANEXDA) Apartado No. 3246 Carerra 45 No. 82-93 Barranquilla	Association of Parents & Friends of Exceptional Children of the Atlantic Founded 1964
Asociación Pro-Niños Subdotados c/o Instituto Tobías Emanuel Loeb Apartado Aereo 5962, Car. 18 Sur N.14 Cali	Association for Handicapped Children Founded 1965
Fundación para Educación Especial Hospital Infantil Universitario "Lorencita Villegas De Santos" Avda. 68. Carerra 40 Bogotá D.E.	Foundation for Special Education Founded 1968, became subscribing member of the ILSMH in 1970.

These organizations are concerned with the operation of a specific program for children; voluntary associations are associated with other schools such as the Colegio de Alamos and the Fundación para la Educación Especializada in Medellin, Antioquia, MYA in Bogotá, and the Clínica Escuela in Manizales.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Diagnosis and assessment, education, work training, medical care - In most cases, the initiative for starting programs has come from the parents, or from a group of professionals at the request of parents. An exception is a center in Bogota started by North American nuns in 1967, Santa Maria de la Providencia. In 1970 there were at least 15 special schools serving retarded children, most under private auspices. Since 1974 special classes in the regular primary schools have been mandated for slow learners or with mild mental retardation ("educable" level). Interdisciplinary teams are to be available, and a "Sección de Subnormales"in the Ministry of Education's Special Education Department provides consultation and assistance. Schools and classes are increasingly incorporating pre-vocational and vocational training in the curricula, but services for older adolescents and adults are still very limited. Some are receiving training in the rehabilitation workshop program for physically and mentally handicapped persons in Bogotá.

The Colombian Institute of Family Welfare has fifty two day care centers for the "total" care of children, financed through private establishments; some of these children are mentally retarded. The University Children's Hospital provides, besides its day school, medical care, evaluation and consultation services, and parent training.

Personnel training - The Education Faculty of the National Pedegogical University has a 2 year mental retardation teacher training program, and has its own day school for practice teaching and observation. The University of Valle in Cali has courses on mental retardation, and maintains close connections with The Tobías Emanuel Institute, through its Psychology Department.

In December, 1973, Cartagena was the site of a Latin American seminar on the mentally retarded held by the Pan American Health Organization, the regional office of the World Health Organization. Short term courses and seminars have been held in Colombia under sponsorship of the Interamerican Childrens Institute, and in recent years by members of the PREP program of the Partners of the Americas which relates concerned persons in the Department of Antioquia to their counterparts in the State of Massachusetts.

Research - The Colombian Institute of Family Welfare and the Human Ecology Research Division of the University of Valle are conducting research programs on the effects of nutritional supplements and environment stimulation in low-income families, as these affect the brain development of children. Both research projects are funded by Harvard University, the Ford Foundation, and the Rockefeller Foundation. (More information about the ICBF study can be obtained from Dr. José Mora at the ICBF.)

OTHER INFORMATION FOR VISITORS

Requests can be made to the organizations listed above or to any Colombian Consulate.

School holiday periods - From December 15 to January 15; from August 1 to August 15.

COSTA RICA

The Republic of Costa Rica is located in the narrow southern section of Central America, with mountain forests covering about 2/3 of its area (19,653 sq. miles). Its population of nearly 2 million, unlike that of its neighbors, Nicaragua on the north and Panama on the south, is predominantly of Spanish descent. The standard of living and social services are comparatively high, and the literacy rate is around 90% in urban areas and 75% in rural areas. There is a social insurance system for workers, and the Ministry of Health supervises nationwide centers for childbirth, child welfare and medical care. Preventive medical care is emphasized.

Coffee and bananas are the chief crops and export products; unique in Latin America is the high proportion of small farm holdings. Though light industry is expanding, over half of the labor force is employed in agriculture and forestry. The language is Spanish and the major religion Roman Catholicism. Costa Rica has been an independent nation since 1821, and is governed by a president and chamber of deputies elected for 4-year terms. An unusual constitution was adopted in 1949 which abolished the army as a permanent institution.

Costa Ricans boast of having more teachers than policemen. More of the national budget than in any other Latin American country (well over 20%) goes to education. Primary education is compulsory and free and secondary education is free. The University of Costa Rica has 16 faculties, and there are other schools of higher education, technical and teacher training schools.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ministerio de Educación Pública Calle 6 y Ave. Central 2da San José	Ministry of Education
Profa. Marlene Rodriguez, Directora Departamento de Educación Especial	Department of Special Education
Lic. Teresita Solan de Wheeler Asesora Retardo Mental	Mental Retardation Supervisor
Ministerio de Salubridad Pública San José	Ministry of Public Health
Ministerio de Gobernación San José	Ministry of Interior (Administration)
Ministerio de Trabajo y Bienestar Social San José	Ministry of Labor and Social Welfare

National planning and coordination - In 1969 a small, official commission "para la Educación de Retardados Mentales" was appointed to study ways of coordinating plans and assistance to all the mentally retarded. It brings together both governmental and private representation, and is now known as the "Comisión Interministerial de Enseñanza Especial," with representatives from all the above Ministries and the associations of parents of the retarded, the blind and cerebral palsied.

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation
Citizen

Asociación Costarricense de Padres de Niños Ecepcionales (ACOPANE)
Dr. Clodomiro Mora Rojas, President
Apartado No. 1435, San José

The Association was founded in 1967 by a group of 30 families. With some interested citizens and professional workers actively cooperating, it intends to help bring existing programs more up to date and to encourage new services. It is an affiliate member of the International League of Societies for the Mentally Handicapped, and was one of the prime movers initiating the work of the Interministerial Commission.

There are also parent organizations for persons with cerebral palsy and blindness.

Including mental retardation

Comite Nacional de Salud Mental	National Committee on Mental Health
Asociación Nacional de Educadores (ANDE)	National Ass'n of Educators
Asociación Scouts de Costa Rica	Scouts Ass'n of Costa Rica
Legion de Maria	Legion of Mary

PUBLICATIONS

Revista de ANDE is the journal of the National Association of Educators. "Estudio de las institutiones, personas y entidades que trabajan en pro de la enseñanza especial," is a study of the institutions, personnel and organizations who work in behalf of special education, issued by the Interministerial Commission in 1969.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Children are referred by the schools, physicians, public health nurses and parents. For diagnostic evaluation, the schools depend on the central services of the School of Special Education of Guadelupe in San José, and the Children's Hospital in San José, the latter being the only complete diagnostic and evaluation center in the country. The Guadelupe school is for blind, deaf and mentally retarded children, but does not have resources for in-depth evaluation of retarded children. Consequently, the children are classified on the basis of scholastic knowledge (school achievement). However, in the school of Quesada City, a diagnostic procedure is carried out by the Director, a teacher with training in testing, and local physicians who volunteer their services. To help parents deal with their children at home, the Department of Special Education in 1975 was planning to have a brochure distributed by public health nurses.

Education - The Guadelupe Center, the largest special school in the country, has 400 children between the ages of 6 and 13 who are blind, deaf or mentally retarded; 240 of these children are retarded, representing the range from severe to borderline. (Psychometric testing indicates that a good number of children in special schools must be considered only functionally retarded.) While there were some 25 special schools in 1975, an effort is being made to integrate as many children as possible into regular schools. Services for the more severely handicapped child and adult are still very limited.

Work training and employment - The Guadelupe school offers training in carpentry, basketry, upholstery, cooking, sewing, tailoring, weaving and mattress making. Other schools and a few Goodwill workshops have some manual work training. A national law requires employers to hire a certain percent of handicapped workers.

Medical care - Specialized medical attention is available at Children's Hospital and at the clinics.

Residential care - There is one institution in Cartago, which increasingly is emphasizing day school programs rather than residential care.

Financial assistance - All services are dependent on government financing. There is also some help from private sources and local fund raising in cases in which not all treatment costs for the individual are paid for by the government.

Research - The Center for Teaching and Research recently established by the Costa Rican Social Security System in cooperation with the International Rehabilitation and Special Education Network based at Michigan State University, U.S.A., has been chosen as the first regional center for the Network.

Personnel training - Some teachers have had specialized training in Spain or Mexico; since 1973 specialized teacher training courses have been given locally. In recent years there has been a close relationship in special education and rehabilitation with the University of Oregon and other universities in the U.S.A. through the "PREP" sector of the Partners of the Americas program.

OTHER INFORMATION FOR VISITORS

Arrangements for visits should be directed to the Ministry of Education, Supervisor of Special Education, or to ACOPANE.

School holiday periods - The long vacation begins the last Saturday of November and ends the first Monday in March.

CZECHOSLOVAKIA
(ČSSR)

The Czechoslovak Socialist Republic lies in the center of Europe, 49,370 square miles in area (about the size of New York State) with a population of 14.8 million. With a history going back to the 9th century, Czechoslovakia has been a federative socialist republic since 1948 composed of 2 Slav nations, the Czechs (65%) and the Slovaks (29%), Hungarian and other peoples making up the remainder. The official languages are Czech and Slovak, other languages used being Russian, German, English, French, Hungarian, etc. Seventy-five percent of the people are Roman Catholic. The rest are Protestant or Greek Orthodox.

The Federative Assembly is the highest organ of legislature; it elects the President who appoints the Cabinet of Ministers. Political parties and social organizations make up the National Front, the controlling political organization. Administrative functions are carried out through a system of "national committees" on a regional, district and local level, districts having about 100-200 thousand inhabitants and regions one million.

Czechoslovakia is among the most highly industrialized countries of Eastern Europe, with a centralized planned economy and considerable natural resources developed by farming, mining and industry. There is little unemployment and the labor force, about 44% women, is traditionally skilled and efficient. There is an extensive social security program, and health and rehabilitation services are widely developed. School is compulsory, from ages 6 to 15; the university system had its beginning in 1348.

GOVERNMENTAL AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministeries

Ministerstvo zdravotnictví — Ministry of Health
tr. Wilhelma Piecka 98
Praha 10 - Vinohrady

In charge of psychiatric, child-psychiatric and general health out-and in-patient care for the mentally retarded.

Ministerstvo skolství — Ministry of Education
Karmelitská 7
Praha 1 - Malá Strana

In charge of special education for the "educable" mentally retarded. (This term includes many moderately as well as mildly retarded children.)

Ministerstvo práce a sociálních vecí — Ministry of Labor and Social Affairs
Palackého nábrezí 4
Praha 2 - Nové Mesto

In charge of facilities for severely mentally retarded and of social problems of all mentally retarded individuals.

VOLUNTARY ORGANIZATIONS

Concerened primarily with mental retardation

Sdružení pro pomoc mentálně postiženým (SPMP)
Jindřišská 14, 110 00 Praha 1

National Association for Aid to the Mentally Handicapped

Registered in 1969, this organization is composed of parents and concerned professional workers. It has branches in different regions of the country and holds annual conferences, often in cooperation with the special education authorities.

Other

Ceskoslovenský cervený kríz
Thunovská 18
Praha 1 - Malá Strana

Czechoslovak Red Cross

This organization helps in recreation and leisure time programs.

Federace Ceskoslovenských Invalidu
Karlinské Námestí Cís 12
Praha 8

Czechoslovak Society for Rehabilitation

The Society is particularly interested in cerebral palsy.

RESEARCH

Research on various aspects of mental retardation is included in specific and general state planning and is realized in competent research institutes and also in special facilities for the mentally retarded.

PUBLICATIONS

There is no Czechoslovak professional journal specifically on mental retardation. Articles on mental retardation are published from time to time in medical, pedagogical and social affairs journals.

Medical: Cs. Psychiatrie
Cs. Pediatrie
Activitas Nervosa Superior

Pedagogical and psychological: Otázky defektologie
Speciální pedagogika
Cs. Psychologie

Social Affairs: Sociální zabezpecení
Sociologický casopis

The Association SPMP publishes a journal "Informace."

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Obligatory prenatal care serves practically all pregnant women and there is obligatory medical care for newborns and infants, as for all children. Early case finding in general takes place in pediatric facilities, later in school and adolescents' health services which are free for all children and adolescents. For more complete examination for purposes of diagnosis, treatment and assessment (from the medical, psychiatric, psychological, social and often pedagogical point of view) children are sent to child psychiatric out- (or in-) patient clinics. Biochemical and chromosomal examinations are available in pediatric clinics of medical facilities. Pedagogical diagnosis is also made in special children's observation homes. Diagnosis of social adjustment of moderate and severely retarded individuals is made in the regional special consultation centers under the social affairs administration.

Education - The education of mildly retarded children is insured by the network of separate day and boarding special schools. There are also some special classes in ordinary schools. Nearly 2 to 2-1/2% of all children attend special schools or special classes; the provisions for children designated handicapped (for any reason) has more than doubled in the last 20 years.

Since 1970 a new conception of special schools has been developed. The obligatory special education begins for 3 to 6 year olds in special kindergartens, and may last up to 16 years of age. Special schools are divided into 2 types -- for the mildly retarded-borderline and for the mildly-moderately retarded.

The more moderately and severely retarded children are educated in day facilities and in residential institutions under the social affairs administration. Institutions for children 3 to 12 years are for boys and girls together, while those for 13 to 25 year olds are for all men or all women.

Work training and employment - The mentally retarded are designated by the special district commissions attached to the school authority (teachers, specially trained educators, psychologists, social workers, child psychiatrists and/or other physicians) as persons with lessened working ability and entitled to have special protection. Such a person has preference of employment in selected working places, although there is still a shortage of special sheltered workshops. A number of apprentice boarding schools provide work-training courses of one to 3 years for 15 to 18 year olds, and jobs in open employment are generally available for these young people.

Medical care - General medical care is ensured in pediatric health centers as for other children. Special care is provided for the mentally retarded in child psychiatric facilities and other special facilities.

Residential care - Most retarded children and young adults live with their parents. Residential service for children in need of care away from home may be provided in psychiatric hospitals for children or in children's wards of psychiatric hospitals.

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Residential care for "educable" children, if indicated, is ensured in special boarding schools; the more severely retarded are in institutions under the social affairs authorities which are also responsible for separate homes for severely retarded men and women over the age of 25.

Financial assistance - Increased family allowance is provided for families with a handicapped child. Financial assistance is given by the state for the care of children in residential institutions of the Ministry of Education and of the Ministry of Labor and Social Affairs. The care in institutions of the Ministry of Health is entirely free as is all out-patient care including medication. Adults aged 26 or older who cannot be employed receive invalidity pensions through the National Social Security Office.

Recreation - Programs for recreation are assisted by the Czechoslovak Red Cross and are an important part of the program of the voluntary parents' organization.

Research - Besides medical and biological investigations, research at this time is oriented especially toward new forms of organization of education and toward social problems of the mentally retarded.

Personnel training - The training of special teachers is given in the pedagogical faculty of universities in the form of postgraduate study for teachers of ordinary schools. The interest of teachers for this study is fairly high.

Planning - The Ministry of Labor and Social Affairs has published a document dealing with future trends in care of the mentally retarded:

"Kolektiv autorů: Koncepce sociálních sluzeb" (1969)

OTHER INFORMATION FOR VISITORS

This can be requested from foreign affairs departments of the responsible Ministries or from the Department of Special Education of the Pedagogical Research Institute - Mikulandská 5., Praha 1 - Nové Mesto.

School holidays - July and August.

DENMARK

Area - 16,538 square miles; population - 5.1 million (not including the Faroe Islands and Greenland); government - constitutional monarchy with unicameral parliament (Folketing). The Danes are a homogeneous people who have inhabited the Jutland Peninsula and the nearby islands since prehistoric times. About 75% of the land and 11% of the labor force is in agriculture, exporting some 3/4 of the products. During the last decades there has been rapid industrial expansion; more than 60% of the people now live in urban areas. Since 1973 unemployment has become a social problem.

Elementary education has been compulsory for more than 150 years; it covers the 7-15 year age group, i.e. a total of 9 years. About 1/2 of the population receives some kind of secondary education, many through evening courses and the folk high schools.

Denmark is a social welfare state which has assumed major responsibility for the education, health and welfare of all its citizens. While some state involvement in services dates from the 16th century, the present wide state responsibility emenates from the social reform legislation of 1933. About 15% of the net national income goes into social expenditures such as the comprehensive health, disability, old age and unemployment schemes. While Danish people are committed to the state's responsibility to provide needed health and welfare services, private initiative has played an important role through such organizations as those for the prevention and amelioration of disease and handicapping conditions.

The first special school for retarded children was opened in 1855 under private auspices. In 1959, following a 4-year study, a new mental retardation law was adopted setting up a semi-independent Mental Retardation Service (Statens Åndssvageforsorg - or S.Å.), under the Ministry of Social Affairs, which has been responsible for all services, residential and community operating through 10 regional care (forsorg) centers. A unique feature of the regional centers is their administration, handled jointly by a directorate consisting of directors of medical care, education, social service and administration.

In 1970 an amendment to the 1959 Act came into force following the report of a Social Reform Commission which made basic organizational, administrative and financial changes in the structure of the rehabilitation and child welfare systems. The Mental Retardation Service is now integrated within the Board of Social Welfare's special services. Decentralization and other administrative changes are aimed to effect greater local responsibility in all program areas. By 1980 the main responsibility for service delivery will have been given over to the local generic service agencies, a logical step in the normalization process.

Much progress have been achieved in almost 20 years of the modernized program, particularly in promotion of the concept of normalization, both in new architectural planning and in community based programs, as well as in humanizing older residential facilities. Particular emphasis is laid on the rights of the individual retarded citizen.

Denmark participates actively with the four other Nordic countries in many areas of mutual interest (see item under Regional Organizations on the Nordic Federation for the Mentally Retarded); her international involvement, especially in aid to developing countries, is generous.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Socialministeriet	Ministry of Social Affairs
Socialstyrelsen	National Board of Social Welfare
Mr. H. C. Seierup, Director	
Socialstyrelsen-Saerforsorg	Special Care Services
Mr. N. E. Bank-Mikkelsen, Director	
Kristineberg 6, Postbox 2555	
2100 Copenhagen Ø.	

The national service for the mentally retarded is carried out under the leadership of the Minister of Social Affairs by the National Board of Social Welfare in connection with the regional care centers. It is responsible for supervision of all specialized retardation programs including, up to the present time, education. There is a central advisory board of 11 members, appointed by the Minister of Social Affairs for a 4-year period, which assists the Board of Social Welfare in carrying out its mental retardation mission. Two of the members are appointed on recommendation of a country-wide association of parents and other relatives to mentally retarded persons, and two from the staff of the Mental Retardation Service. There is similar representation on the regional advisory boards.

The Sundhedsstyrelsen (National Health Board), a unit of the Ministry of Interior, supervises the implementation of Denmark's broad health legislation. For its relevance in mental retardation, see Brief Descriptive Notes on case finding.

Undervisingsministeriet	Ministry of Education
Mr. I. Skov Jørgensen, Inspektør	Superintendent
Specialundervisningen	Special Education
Frederiksholms Kanal 26	
1220 Copenhagen K.	

The Ministry of Education is involved directly in services for the retarded only in a consultative capacity at present, but this is expected to change in the next few years. Slow learners and handicapped children not considered to be mentally retarded are educated in special classes (or in special education centers) which are part of the regular school system.

National planning and coordination - is the responsibility of the National Board of Social Welfare in connection with the regional centers. In the voluntary sector, there is a coordinating body for all the handicapped:

De Samvirkende Invalidenorganization
Randersgade 61
2100 Copenhagen Ø.

VOLUNTARY ORGANIZATIONS

Professional

Dansk Selskab for Oligofrenologiforskning c/o Dr. Annalise Dupont Institut for psyckiatrisk demografi Statshospitalet ved Århus 8240 Riisskov	Danish Society for Research in Mental Retardation

This is one of the founding member organizations of the International Association for the Scientific Study of Mental Deficiency, which was constituted during the 1964 Copenhagen Congress on the Scientific Study of Mental Retardation.

Citizen

Landsforeningen Evnesvages Vel Vester Voldgade 96 1552 Copenhaven V. Mr. Albert Christensen, President	National Society for the Mentally Retarded

The organization was a founding member of the International League of Societies for the Mentally Handicapped; it celebrated its 25th anniversary in 1977. Besides very close cooperation with the Mental Retardation Service it promotes education of the public and its own members, primarily parents of the mentally retarded. Some of the monies raised by public appeal are used to promote research, certain others as loans to the Mental Retardation Service for initiation of new hostels or sheltered workshops until budget funds become available. In recent years such money has been used as a guarantee fund for the (high) advance deposits needed to rent apartments for retarded clients ready for independent living.

RESEARCH

Åndssvageforsorgens Forskningsudvalg Postbox 2555 2100 Copenhagen Ø.	Research Committee of the Mental Retardation Service Mr. N.E. Bank-Mikkelsen, Chairman
John F. Kennedy Instituttet Glammel Landevej 7-9 2600 Glostrup	John F. Kennedy Research Institute Dr. Erik Wamberg, Director
Universitetets Arvebiologiske Institut Tagensvej 14 2200 Copenhagen N.	University Institute of Human Genetics Professor Jan Mohr, Director
Socialforskning Instituttet Borgergade 28 1300 Copenhagen K.	Institute for Social Research Mr Henning Friis, Director

PUBLICATIONS

Journals

S.Å.-nyt (Mental Retardation News) Postbox 2555 2100 Copenhagen Ø.	Monthly publication of the Socialstyrelsen
S.Å. Paedagogen (The M.R. Educator) Kompagnistraede 32A 1208 Copenhagen K.	Bimonthly publication of the S.Å. Teachers' Ass'n
Evnesvages Vel (Wellbeing of the Retarded) Vester Volgade 96 1552 Copenhagen V.	Monthly publication of the National Society for the Mentally Retarded

Directories

Listing of facillilities for the mentally retarded in Denmark, edited by the Mental Retardation Service, is available free of charge.

Rehabilitation and Care of the Handicapped, No. 6 in the series, "Social Conditions in Denmark"(1967) is available from the Ministry of Social Affairs, International Relations Division, Slotsholmsgade 6, 1212 Copenhagen K. Free of charge.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - An Act against sickness and mortality of infants in their first year was passed in 1937 as the first of a series of preventive laws. The health of children is regularly checked in their homes by visiting public health nurses. A later Act provides for 9 free preventive medical examinations of infants from birth to their seventh year.

At school age (7 years) health control is taken over by the school doctor attached to each school, who carries out regular examinations. Any departure from normal development is reported to the family doctor, who provides the required treatment and who is to report to the Mental Retardation Service any person who may be in need of assistance from the Service. Preventive work is, for the most part, the responsibility of the general practitioner who plays an important role in the Danish health system.

Public authorities, physicians, teachers and others, who through their activities are in touch with the mentally retarded, are to furnish reports to the Mental Retardation Service.

According to the Act of 1959, the Service is required to give the necessary guidance to parents on care, treatment and possibility for financial aid. Existing facilities for help and assistance, such as walking aids, physio- and occupational therapy, social work, etc. are likewise to be brought to the attention of the parents. However, parents have not always found the right kind of help early enough, i.e. before age 3.

Education - Mentally retarded children, or those functioning on a level with mental retardation, and who cannot adjust in the special classes for slow learners or in the special educational centers of the ordinary primary school, are subject to compulsory education and training from the age of 7 to the age of 21; this may be fulfilled as home-tuition or in any other way. Planning is underway for the gradual transfer of responsibility for educational services for all school age retarded children from the Service to the public school system.

Approximately 1,700 trained educators (including kindergarten teachers) belonging to the Mental Retardation Service system provide for the education of nearly 6,300 children. There are 72 special day schools (of which 32 are the pre-fabricated, "Green Schools") first planned to serve the mildly retarded, but they have increasingly accepted moderately retarded children.

Fifty-one "kindergartens" are serving the more severely handicapped and those with emotional disturbances; the upper age limit is flexible and children may remain for extended periods depending on individual needs and facilities available. The trend is to provide for these older children in "training schools" or in separate classes in the above-mentioned special schools. In future, they will attend special educational centers of the primary school.

Adult education is provided in workshops, either during the working hours or, as other kinds of education for adults, in the evening schools of the municipality. A center for adult education was opened in 1970 in the "Spaniensgade" experimental facility in Copenhagen, which also provides work training and living facilities for individuals and a few married couples.

A main emphasis throughout the education of the mentally retarded in Denmark is to help them acquire skills in daily living and preparation for future "independent" living.

Work training and employment - The Mental Retardation Service has established approximately 85 sheltered workshops for nearly 2,800 workers. All workshops are equipped with modern machines for industrial production. A considerable number of retarded adults work in open employment.

Medical care - Each regional center provides for a variety of treatment possibilities for both residential and non-residential clientele suffering from motor handicaps, cerebral palsy, and other developmental handicaps, including clinical facilities for dentists, opthalmologists, otologists, speech therapists and physiotherapists. 110 full-time medical doctors (psychiatrists, child psychiatrists, pediatricians) and dentists are permanently employed with the Service, plus a large number of part-time consultants.

Residential care - In addition to its central institution, a region may provide boarding schools, school homes, short-stay care homes for the aged and sick, smaller local institutions and hostels for working adults. In 1976 there were 126 such facilities serving 9,307 of the 20,535 persons registered with the Service (4.4 per thousand of the total population).

The size of these facilities differs considerably; the goal is toward provision of as normal conditions as possible, with bedrooms for one or no more than four, even for the severely retarded. Today, the trend is toward providing even moderately retarded persons with independent residences, i.e. in the community.

Financial assistance - All care is free to all mentally retarded persons. Financial aid is given to the retarded person himself, or to parents to help them to keep their child at home; for example, parents with children suffering from motor handicaps may apply for an interest-free loan to buy a car. Mentally retarded adults who are not living in a residential institution receive a disability pension. Residents unable to work get pocket money, whereas those who are employed in sheltered workshops or open employment receive wages in addition to their disability pension.

Recreation - All mentally retarded persons are entitled to recreation and leisure time activities. Recreation centers, holiday camps, holiday trips are open to all and trips to foreign countries are frequent. Evening recreation, hobby-rooms and the like are available for leisure time.

Research - Traditionally, provision for the care of retarded persons and support to their families has been considered more important than research. However, in the period from 1965 to 1977, the Research Committee of the Mental Retardation Service has financed, through a special fund, over 100 research projects on medical, social, educational and other subjects. The scope of the John F. Kennedy Research Institute, originally intended for research on phenylketonuria, has been widened to encompass other disorders, including a special section for chromosome research. Other research, directly or indirectly related to mental retardation, is promoted by the Danish Society for the Scientific Study of Oligophrenia and other scientific organizations, including the National Institute of Social Research.

Personnel training - Since 1961 the Mental Retardation Service has maintained a Personnel Training School (Personalehojskølen - Islands Brygge 83 A., 2300 Copenhagen S.) which annually trains some 400 students as "Care Assistants." (In Denmark, the Care Assistant is the worker with long-term contact with a number of handicapped clients, and the worker with overall responsibility for their development and well being.) The 3-year salaried training period is spent in part at the school, in part in practical training in the various types of service facilities. A parallel 3-year training course for "Social Care Officers" has recently been started which prepares direct care workers in the field of both the aged and the handicapped. The School also provides supplementary courses for senior staff members, social workers, therapists, sheltered workshop personnel, etc. Among its publications are the 1974 and 1976 issues in English of "Flash on the Danish National Service for the Mentally Retarded," edited by the School's Director, Mr. Børge Nielsen, which discusses a wide variety of subjects of particular concern in the field.

Teachers are required to have passed the Teacher Certificate Examination or certification as kindergarten or recreation teachers, and additional in-service and short course training is provided.

Planning - A special planning system has been established by law providing 5-year development plans for each region, to be revised each year. Planning is aided by a system of electronic data processing, in which the registration of mentally retarded persons is linked up with a registration of the whole population. All mentally retarded persons receiving some kind of help are registered both under the local centers and on a national register. This standardized information by means of computers provides data for statistics, administrative planning, and research.

OTHER INFORMATION FOR VISITORS

The National Board of Social Welfare will arrange programs for visitors from abroad, but adequate advance notice should be given. Address inquiries to:

Mr. N. E. Bank-Mikkelsen, Director
or
Mrs. Gesche Alberts, Assistant
Socialstyrelsen-Saerforsorg
Kristineberg 6, Postbox 2555
2100 Copenhagen Ø. Tel. 01-29.91.22

The Danish Institute for Information offers short term seminars on social welfare, care of the aged, architecture, etc.,including a two week travel seminar on "Special Education in Scandinavia" with visits to programs in Norway, Sweden and Denmark.

Det Danske Selskab
2, Kultorvet
1175 Copenhagen K.

School holidays - The schools of the Mental Retardation Service are open from 8 till 2 o'clock on Mondays through Fridays, kindergartens from 8 to 3 p.m. Summer vacations are normally from June 20 to August 20. The 3rd week of October is autumn holiday; winter vacation from December 20 till January 7; Easter vacation is approximately one week.

DOMINICAN REPUBLIC

Area - 18,816 sq. miles. It is located on the West Indies island of Hispanola, which it shares with Haiti. The Dominican Republic has existed as an independent state since 1899, with exception of brief interludes of foreign intervention. On the basis of the Constitution adopted in 1966, executive power is vested in the President who is elected by the people, and in his cabinet. Legislative powers rest with the bicameral Congress. All citizens must vote when 18 years old. The Dominican Republic is a member of the United Nations and the Organization of American States.

The population is about 4.8 million, an estimated increase of a million in the last 7 years. It is largely of mixed (mestizo and mulatto 75%; white 16%, black 11%) origin; Spanish is the official language. The chief religion is Roman Catholicism. Santo Domingo, the oldest settlement founded by Europeans in the western hemisphere (1496), has a population over 800,000. The country's economy is predominately agricultural (sugar, coffee, cacao) but foreign investments are leading to increasing industrialization.

A system of social and health insurance with coverage limited to certain types of employees was introduced in 1968 and is administered by the Dominican Social Insurance Institute, under supervision from the Department of Health and Social Welfare.

The University of Santo Domingo was established in 1538. Elementary education is compulsory but lack of school facilities on the one hand, and the economic hardships burdening many families causes dropping-out of school to be widespread.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Government assistance to the mentally retarded is primarily through the generic aid provided by the Secretariat of Public Health and Social Security (Secretaria de Salud Pública y Previsión Social) for general health and social services in which retarded members of a family are included. In 1969 a Department of Special Education was created within the Ministry of Education, and in that same year special teacher training courses were begun in one of the universities.

VOLUNTARY ORGANIZATIONS

Asociación Pro-Rehabilitación de Invalidos Sección Retardo Mental Apartado de Correos 1054, Santo Domingo	Dr. Jordi Brossa, Director del Sección Retardo Mental

The Mental Retardation Section of the Association for Rehabilitation of the Disabled was the first Dominican organization to provide specialized services for the mentally retarded. It was established in 1967; until then the Association's concern was limited to the physically handicapped, as has been the case in so many countries. The Association is a member of the International Society for Rehabilitation of the Disabled.

Asociación de Padres de Niños Excepcionales
Leopoldo Navarro y Kennedy
(Aptdo. de correos 1054), Santo Domingo

This association of parents and friends developed from and maintains close relationship with the Mental Retardation Section of the Rehabilitation Association. While its activities have centered primarily around the special school for retarded children started in 1967, it is a member of the International League of Societies for the Mentally Handicapped, and of the Caribbean Association on Mental Retardation.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Plans to establish a pilot school for mentally retarded children were initiated by Dr. Brossa, who brought together an inter-disciplinary group of people interested in the problem, representing the fields of pediatrics, psychology, neurology, psychiatry, education and otolaryngology.

The team began a program of assessment of children with abnormalities and learning problems, giving as well consultation to the parents. Assistance in planning, selection of children and organization of the school, plus special teacher training has been provided through visits of special educators from Chile and Uruguay, and in particular, by the long term assignment of a United Nations Technical Expert, Dra. Dora Sarasola of Montevideo.

The new school buildings include a diagnostic and orientation center. About 100 pupils are being educated, and plans are underway to start special classes in other parts of the city and in other towns as more teachers become trained.

In 1976, the 4th Conference of the Caribbean Association on Mental Retardation was held in Santo Domingo, on invitation of Dr. Brossa, CAMR's President since 1974.

OTHER INFORMATION FOR VISITORS

Requests for information may be made of the Asociación de Padres de Niños Excepcionales.

ECUADOR

The republic of Ecuador occupies 109,483 square miles on the northwest coast of South America, making it the second smallest country on that continent. The Roman Catholic religion is practiced, and Spanish, Quéchua and Jibaro are spoken. Since 1972, Ecuador has been governed by 2 successive military junta governments.

The population (6.7 million) is mainly rural , with agriculture being the basis for the economy, although less than 12,000,000 acres are actually devoted to it. The main crop is cacao, and Ecuador is the world's chief exporter of balsa wood and bananas, with oil also being an important export. Two high, north to south Andes ranges, which have had volcanic eruptions in recent years, divide the country into 3 sections: coastal, hot, humid lowlands; middle, temperate highlands (in which Quito, the capital is located); and eastern, tropical lowlands. A fourth area is the Galapagos Islands in the Pacific.

Rural medical facilities are very limited, and the number of primary schools is insufficient to carry out the compulsory primary education law in all areas. Primary schools are generally government operated, and about 80% are located in rural areas. There are also secondary schools, 14 universities (4 public), about 200 technical schools, and some other institutes of higher education such as teacher training. Certain workers are covered by pensions through the national social insurance system, for which the government pays part of the costs.

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation - citizen

Asociación Nacional de Padres y Amigos del Deficiente Mentale
Casilla 56
Loja

(National Association of Parents and Friends of the Mentally Retarded)

This association became a member of the League in 1974, and the other voluntary associations became affiliated with the League through this national association.

Asociación Ecuatoriana para Niños Retardos (ASENIR)
P.O. Box 24
Guayaquil

(Ecuador Association for Retarded Children)

This association became a member of the League in 1966.

Sociedad de Educación Especial y Rehabilitation
Casilla 2359 (Roca 418)
Quito

(Society for Special Education and Rehabilitation)

Descriptive Notes - Ecuador does not have many programs for the retarded, but some efforts to develop educational programs have been successful. These have been done by the voluntary organizations, with some limited government support. Through such efforts, there are now about 4 schools serving a few hundred 5 to 24 year olds of "trainable" and "educable" abilities. The Association for Retarded Children (ASENIR) operates one such school, and also has a sheltered workshop in Guayaquil. The Quito Society started a school in 1971, the Centro de Educación Especial y Rehabilitación, for about 100 children. (The voluntary organizations also work with parents of retarded children.)

The Ecuador Department of Education pays some teacher salaries, as well as some costs of teacher training at the University of Lima, Peru, and in Montevideo, Uruguay. Local governments sometimes contribute toward costs by providing buildings, etc. Additionally, through the Social Security Institute of the Ministry of Social Welfare and Labor, a small amount toward the education of some children is paid if their parents are eligible for social insurance pensions. Other school costs are borne by the private organizations, the children's parents, and occasional donations.

OTHER INFORMATION FOR VISITORS

Information may be requested from any of the three voluntary associations; preferably this should be written in Spanish.

School holidays - the long vacation comes during the months of December and January.

EGYPT

The Arab Republic of Egypt has an area of 386,661 square miles on the northeast coast of Africa. It is a nearly rainless desert with a population of almost 38 million living in only 3.6% of the total area, the arable valley and delta of the Nile. With the exception of small minority groups, the Egyption population is fairly homogeneous, 93% Moslem and 7% Coptic Christian. Arabic is the official language; the capital city is Cairo. Egypt has a recorded history of almost 6,000 years; since 1953 it has been a republic, functioning under a provisional constitution with executive authority resting in the President who appoints the Prime Minister and Cabinet. Parliamentary constituencies are established on a combined regional-occupational basis. Egypt is divided into 24 governorates, whose appointed governors are responsible for implementing policy made in Cairo. About 20% of the national budget is allotted to economic development; principal exports are cotton, rice, mineral products, textiles and manufactured products.

Education is compulsory beginning at age 6 and is free through the university level. Since 1952 elementary school attendance has risen from 40% to 90%. In addition to the University of Al-Azhar, historic seat of Moslem learning, there are technical schools, teacher training schools, and 10 modern universities, 5 of them in Cairo. There is a concerted drive to increase the rate of literacy, now about 70-75%, through adult education and community development programs.

As more of the endemic infectious diseases have been brought under control, and elementary school facilities extended, it has been possible to make a substantial start in providing programs for the handicapped, beginning with the blind and physically handicapped and now including children who are mentally retarded, deaf-mute or who have leprosy, cancer, or other diseases.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Social Affairs
Dr. Salah El-Hommossani, Rehabilitation Advisor
Mogama Building, El-Tahrir Square, Cairo

Ministry of Education
Mr. Mahmoud Hassan Taha, Senior Undersecretary
Falaky Street, Cairo

Ministry of Health
Dr. Ahmed Wagdi Sadek, Mental Health Advisor
15, Kamal El-Din Salah Str., Garden City, Cairo

NATIONAL PLANNING AND COORDINATING ORGANIZATION

Union of Agencies for Rehabilitation of the Disabled
Dr. Hassan Sabry El-Kholy, President
32 Sabri Abou Alam Str., Apt. 22, Cairo

Voluntary and governmental agencies must be members of the Union.

VOLUNTARY ORGANIZATION

With primary concern in mental retardation

Society for Rehabilitation of the Mentally Handicapped
c/o Dr. Hassan Sabry El-Kholy
32 Sabri Abou Alam Str., Apt. 22, Cairo

Founded in 1966, the Society brings together experts from various fields and plays a leading role in program planning and demonstration of services.

PUBLICATIONS

The professional journals which most frequently publish articles on mental retardation are the "Journal of Modern Education" and the "Journal of the Egyptian Association of Mental Health."

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Traditionally in Egypt as in many countries the birth of a disabled child has been seen by parents as an act of God which must be accepted and about which nothing could be done. Modernization is bringing changes in attitude so that, while a disabled child is still warmly regarded as a part of the family, action to improve the child's development potential is increasingly recognized as possible and desirable. Diagnosis and assessment services are available in the larger cities in general hospitals and university psychological clinics, faculties of education, charitable institutions, and the vocational training centers of the Ministry of Social Affairs. Also, the Society for Rehabilitation of the Mentally Handicapped is concerned with case finding, diagnosis and assessment, and consultation to parents at its institute at Mataria.

Education - Since 1956 mildly retarded children (approximate IQ 50-70/75) are liable for compulsory schooling in so far as there are special classes or schools in their locality. Presently, about 1,800 are being served under the special education program of the Ministry of Education.

The Ministry of Social Affairs has delegated its responsibility for nearly 1,500 retarded children and young adults, the majority of whom are in 6 residential institutions, to the Society for the Rehabilitation of the Mentally Handicapped.

Vocational training - Social and vocational training is emphasized in all facilities for the retarded, preparing the young people to earn a living in such trades as carpentry, carpet making, ceramics and leatherwork, housecraft, sewing and tailoring. The Mataria Training Center, a day workshop, provides children of all ages and both sexes with advanced training after which they are placed in the community for further training or as regular employees. Other such centers are those at Helwan (13-18 year old girls) and at Zeitoun (13-18 year old boys). Social workers of the Ministry or of other social service organizations are active in helping to find work placement for retarded school-leavers; 1975 legislation raised the percentage of compulsory employment of the physically and mentally handicapped from 2% to 5%.

Medical care - Health problems of school age children are dealt with by the School Health Service of the Ministry of Health. The Ministry also provides medical help in hospitals, including special sections for severely retarded persons in its mental hospitals.

Residential care - In addition to the 6 residential schools noted above, the Ministry of Social Affairs is responsible for 2 units for the delinquent retarded. There are also a number of smaller private establishments receiving government grants. The Hadaiek El Kobba center has students in residence from Saturday morning to Thursday afternoon, and provides academic and trade training.

Financial assistance - Government schools and institutions are free of charge.

Recreation and leisure time programs - Comprehensive recreational programs in facilities for the retarded are planned by a specialist for daily activities and group games, as well as for summer camps.

Research - In 1972 a 6½ year study was completed, supported by funds from the U.S. government, on the vocational potential of retarded adolescents within the socio-economic and vocational structure of the city of Cairo. Another research and demonstration project started in 1973 concerns a comprehensive approach to rehabilitation of the retarded through evaluation, counseling, vocational and pre-vocational training; and provides research training for rehabilitation personnel. Studies linking severe malnutrition and lack of an intellectually stimulating environment have been made; recently reported by the Medical Research Institute of Alexandria University is a 10 year study on the incidence of Down Syndrome (0.84%) in newborns.

Personnel training - Special education teachers receive a 2-year special training in supplementary divisions of teacher training schools, both general and rural. Child care workers in residential homes and social workers have specialized training in an institute of social service, either 2 or 4 years in length. Recruitment is not a problem.

Planning and coordination - The Society for Rehabitation of the Mentally Handicapped is responsible for the general planning of technical and administrative programs and periodic follow-up, together with the Planning Department of the Ministry of Social Affairs. The scientific board of the Society, headed by Dr. Hassan Sabry El-Kholy, has 9 advisors covering all disciplines concerned with mental retardation, and deals with the determination of needs and requirements, prospective projects in rehabilitation and care, research and coordination, organization of conferences, seminars and training courses for Egypt and other Arab countries, and setting up new centers and units for vocational training.

OTHER INFORMATION FOR VISITORS

Requests for information can be sent to: Dr. Hassan Sabry El-Kholy at the Society for the Rehabilitation of the Mentally Handicapped, Dr. Salah El-Hommossani at the Ministry of Social Affairs, or Dr. Ahmed Wagdi Sadek at the Ministry of Health (see addresses above).

School holidays are from mid-June to mid-September.

EL SALVADOR

The republic of El Salvador, independent from Spain since 1821, is the smallest of the 6 Central American republics (area - 8,260 square miles); the capital is San Salvador. The population is about 4 million, with 85% mixed, 10% Indian and 5% white. The language is Spanish and the predominant religion Roman Catholic. The President is elected by direct popular vote for a 5-year term; voting is compulsory for all over 18 years of age. El Salvador is a member of the United Nations and the Organization of American States. The economy is based primarily upon agriculture, especially coffee growing, but industry is increasing.

Primary education is free and compulsory, but non-attendance is high, especially in rural areas; the literacy rate is about 50% and on the increase. There are secondary schools and schools of higher education, including the Catholic university and the National university in San Salvador, which is particularly well respected in Latin America. The partially government supported social insurance system for some employed persons is gradually being extended to all regions of the country. It operates under the Salvadorian Social Insurance Institute, an autonomous agency with a board representing government, management, labor and other professional groups. Besides pensions, it provides medical services through its own out-patient clinics and 8 hospitals.

Services for retarded children were started in the 1950's by the Instituto Salvadoreño de Rehabilitación de Inválidos (I.S.R.I. - Salvadorian Institute for Rehabilitation of the Disabled). It has a governing board with representatives of the Ministries of Public Health, Housing, Social Security and the private sector. It receives some funds from the Ministry of Public Health and has 6 centers for different handicap groups including a Center for Cerebral Palsy and a Center for Special Education of the Mentally Retarded.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministerio de Salud Pública San Salvador	Ministry of Public Health
Ministerio de Educación San Salvador	Ministry of Education
Instituto de Seguridad Social San Salvador	Social Insurance Institute

BRIEF NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - While there is no organized case finding, information about infant health services and the availability of the new Children's Hospital is included in basic military training so that modern health knowledge can be spread into the mountain villages as the soldiers return to their homes. Severe cases are detected at birth by physicians, but moderately and severely retarded children are generally identified through the schools and referred for assessment to the psychiatrists, neurologists and psychologists at the Children's Hospital or the special schools. There is a small, short-stay home as part of the I.S.R.I. program where country children may stay with an accompanying person during assessment or for an intensive training period.

Education - The I.S.R.I. special school has about 260 mildly and moderately retarded children who are considered "educable." A day school started in 1970 by the Ministry of Education has some 150 mildly, moderately and also severely retarded pupils. Some special classes are now being started in regular schools. The schools emphasize social and some prevocational training and sheltered work preparation, but job placement is difficult considering the high degree of unemployment in the country.

Medical care - The physician (psychiatrist and/or neurologist) plays a leading role in mental retardation services, aided by paramedical professional workers, especially phoniatrists (speech therapists) and physical therapists who have learned to make the best out of limited materials.

Personnel training - Some teachers have been trained in courses given between 1954 and 1958 under a specialist from Mexico; a few have had additional courses in another Latin American country or, recently, through the Partners of the Americas PREP (Partners Rehabilitation and Education Program) relationship with the state of Louisiana.

Planning - There have been some regional studies on special education resources through the planning office of the Organization of Central American States and in connection with the University of Louisiana.

OTHER INFORMATION FOR VISITORS

Requests for information can be sent to:

Instituto Salvadoreño de Rehabilitación de Inválidos
3a calle Poniente 617
San Salvador

or:

Centro de Educación Especial
Ave. Los Diplomáticos
San Jacinto
San Salvador

School holiday periods - The long vacation extends through the months of December and January.

FAEROE ISLANDS

(DENMARK)

The Faeroe Islands are 18 in number, 17 of which are inhabited, situated about 850 miles from Denmark in the north Atlantic, 200 miles northeast of the Shetland Islands. They occupy 540 sq. miles, have a population of 43,000 and the capital city is Thorshavn. The chief industries are fishing, fish products, and sheep grazing.

As an autonomous part of the Danish kingdom, they are self-governing in most matters, having had home rule since 1948, and have their own language, culture and traditions. There is an elected legislature which sends two representatives to the Danish folketing (parliament). Plans are underway for Faeroe Islands to take over its own educational administration, as has been accomplished already for social administration, including mental retardation services (1975 and 1976) This has enabled planning and service delivery for the retarded to be done in Faeroe rather than in Denmark.

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation

JAVNI - Landsfelagið evnaveikum at bata
Hoyvik, 3800 Tórshavn

This association of parents, professional workers and other concerned citizens was founded in 1971 and has been a member of the Nordic Association for the Mentally Retarded since 1975. It presently has about 1,350 members, including some local municipalities, probably the highest membership in proportion to population of any such association anywhere.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

There are 175 persons registered in mental retardation services: 33 in residential settings and 65 in other services in Faeroe, with 77 persons still in care in Denmark. All retarded children of compulsory education age are in school, four in ordinary schools and 26 in a special school, "Skulin a Trødni"; additionally 2 adults are enrolled in their local schools. The special school has a preschool section for children of all types of handicaps and two other preschools include retarded children, one in Tôrshavn and one in Klaksvik.

Founded on the initiative of parents, JAVNI publishes a journal, holds public information meetings, and plans and provides some services to the retarded and their families. For example, in 1973, it helped to start two programs in connection with a new state hospital in Tôrshavn -- a residence for 20 children and a group home for 11 adults. These will make it possible for Faeroe citizens to be served on the islands rather than having to be sent to Denmark when residential care is necessary.

OTHER INFORMATION FOR VISITORS

Information may be obtained from JAVNI at the above address.

School holiday periods - Christmas, Easter, July and August.

FIJI ISLANDS

Fiji, a parliamentary democracy in the southwest Pacific, about 1,960 miles east of Sydney, Australia and 1,250 miles north of New Zealand, a former British colony, has been a self-governing member of the British Commonwealth since 1970. It covers 7,055 square miles on about 840 islands, of which 106 are inhabited by about 580,000 people. The largest island, Viti Levu, is the site of the capital, Suva. The people are descended from native Fijians (43%) or Indians (51%), with some of Chinese or European descent. Although English is the official language, Fijian, Hindustani and Chinese are also spoken; religions include Christian sects, Hindu and Moslem. Agriculture is the basis of the economy (sugar, molasses, coconut products, etc.); tourism is an important source of income. There is an extensive educational system, both publicly and privately operated, including technical and vocational schools, 3 teacher training schools, a medical school, and the University of the South Pacific near Suva. The literacy rate is about 85%.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry for Social Services
Education Department
Suva

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation

Fiji Society for the Intellectually Handicapped
P.O. Box 896, Suva

Located in Suva and Lautoka, this group was started in 1970 with the help of the New Zealand Society for the Intellectually Handicapped, the Whangarei Rotary Club (New Zealand) and the Fiji Jaycees. It has mobilized public interest, including that of children in ordinary schools, to a better understanding of mental retardation, and of the need for assistance in fund raising. The Fiji Society is a member of the International League of Societies for the Mentally Handicapped.

Other organizations which include mental retardation

Crippled Children's Society
Suva

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

The Fiji Society for the Intellectually Handicapped, with cooperation and consultation from the Education Department, the New Zealand Society for the Intellectually Handicapped, the U.S. Peace Corps the Fiji Crippled Children's Society, the University of the South Pacific and foreign experts, has been involved in starting services for the retarded since 1970. A day care center has been run at the Jasper Williams School with volunteer staff and a teacher provided by the Education Department. Also opened in

1970 was the Intellectually Handicapped School, staffed by volunteers, Education Department employees, and a teacher trained in New Zealand. This school facilitates case finding in that parents or hospitals can send children there for diagnosis and assessment, which is then done with the aid of the Cripplied Children's School in Suva, Inservice training is provided at the Intellectually Handicapped School, and the New Zealand Society for the Intellectually Handicapped has provided some training as well.

OTHER INFORMATION FOR VISITORS

Information can be requested from the Department of Education, Suva or from the Fiji Society for the Intellectually Handicapped.

FINLAND

Area - 130,119 square miles; population 4.7 million; government - a republic with a single chamber parliament system and strong presidency. For 700 years Finland was a part of the Kingdom of Sweden, and from 1809 to 1917 was an autonomous Grand Duchy within the Russian Empire. The fourth largest state in Europe in area, Finald extends deep into the Arctic Zone, and 2/3 of its area are in forests. The population is more than 92% Finnish-speaking with Swedish-speaking people living in the southeastern part of the country. Finland shares with Sweden and the USSR a small migrant Lapp population. 83% of the Finnish people belong to the Evangelical Lutheran Church which sponsors many health and welfare services. The basic units of local government are the communes, originally church parishes, having a high degree of self-administration and ranging in population size from an average of 29,300 (urban) to 5,300 (rural). The capital city, Helsinki, has about 550,000 inhabitants.

Finland is rapidly becoming a major industrial country with half of its people living in cities and towns. Forestry and wood processing industries predominate in export products. About 20% of the working population is employed in agriculture, accounting for less than 10% of the national income.

There is compulsory 9-year free elementary education from age 7 to 16, and practically no illiteracy. Women have been entitled to vote since 1906. Finland has comprehensive national health and social security programs (social insurance and benefits such as maternity and child allowances, pensions, accident and sickness insurance). Additional services are based on individualized needs and are locally administered by the social welfare boards of the communes.

Care of mentally retarded persons was started toward the end of the 19th century. Some provisions for them were later included in child welfare and education laws, but the first comprehensive Act on the Mentally Retarded was passed in 1958. It applies to all who, mainly owing to retarded intelligence, are in need of constant care, special education and supervision. It is enforced by both the health and welfare branches of the Ministry of Social Affairs and Health, with local administration in the hands of the communal welfare boards. The country is divided into 14 mental retardation districts, each one having a central institution for residential care. There are two central institutions yet to be built.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Sosiaali - ja terveysministeriö Snellmanninkatu 4-6 Helsinki 17	Ministry of Social Affairs and Health
Sosiaalihallitus Siltasaarenkatu 18 C Helsinki 53	National Board of Social Affairs
Vammaishuolto-osasto	Department for the Disabled
Vajaamielishuoltotoimisto	Office for the Care of the Mentally Retarded

Lääkintöhallitus Siltasaarenkatu 18 A Helsinki 53	National Board of Health
Mielisairaanhoito-osasto	Mental Health Department
Opetusministeriö Rauhankatu 4 Helsinki 17	Ministry of Education
Kouluhallitus Hakaniemenkatu 2 Helsinki 53	National Board of Schools
Opetusosasto	Education Department
Erityisopetustoimisto	Special Education Office
Liikenneministeriö Aleksanterinkatu 3 D Helsinki 17	Ministry of Traffic
Työvoimaministeriö Kalevankatu 13 Helsinki 10	Ministry of Labor
Työvoimaosasto Albertinkatu 34 Helsinki 18	Department of Labor
Tyonvalitysasioiden toimisto Siltasaarenkatu 3 Helsinki 53	Labor Exchange Office
Ammatinvalinnanoh jaustoimisto Messeniuksenkatu 1 Helsinki 25	Career Selection Guidance Office

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Professional

Kehitysvammaliitto r.y. Minervankatu 2 A 10 Helsinki 10	National Welfare Association for the Mentally Deficient

The National Welfare Association for the Mentally Deficient was established in 1951 as a central cooperative body of private organizations providing residential care; the Association's sphere of concern has broadened to include the total field of mental retardation services and planning. It consists of over 40 affiliated organizations, participates actively in the Nordic Association for Mental Retardation and the International Association for the Scientific Study of Mental Deficiency.

Citizen

Kehitysvammaisten Tukiyhdistysten Liitto r.y. Itsenäisyydenkatu 11 A Tampere 50	National Association of Societies in Aid of the Mentally Handicapped

The first societies of parents and friends of the mentally retarded were founded in 1957 and the National Association in 1961. There are now over 150 societies and a membership of nearly 10,000 including individuals in small or sparsely populated localities who are unable to join local societies. The Association promotes programs of public information, provides consultation and training courses for parents, and through the local societies is responsible for various direct services such as day centers, sheltered workshops, and recreation. It cooperates closely with the National Welfare Association for the Mentally Deficient and is a member of the International League of Societies for the Mentally Handicapped since 1963.

De Utvecklingsstördas Väl Mannerheimintie 21-23 B 20 Helsinki 25	National Association of Swedish-speaking Societies in Aid of the Mentally Handicapped

This Association serves the Swedish-speaking population. It cooperates with the above organization and also the Swedish national FUB, and functions in a similar manner.

Other organizations which include some concern for mental retardation

Erityiskansanopiston Kannatusyhdistys Lehtimäen opisto, 63500 Lehtimäki	Association for Special Adult Education
Suomen Erityiskasvatuksen Liitto	Association for Special Education in Finland
Mannerheimin Lastensuojeluliito 2, linja 17 Helsinki 53	Mannerheim League for Child Welfare
Nuorten Ystävät r.y. Rautatienkatu 1 Oulu 10	Friends of Youth
Orpojen Ystäväin Liitto r.y. Pipola Karjalohja	Association of Friends of Orphans
Suomen Kirkon Sisälähetysseura Töölönkatu 55 Helsinki 25	Finnish Church Home Missions Society

RESEARCH

Sosiaali - ja terveysministeriö Snellmanninkatu 4-6 Helsinki 17	Ministry of Social Affairs and Health
Jyväskylän Yliopisto Seminaarinkatu 15 Jyväskylä	Jyväskylä University
Erityispedagogiikan laitos	Department of Special Education
Rinnekoti - Säätion Tutkimuslaitos Rinnekoti 02980 Majalampi	Rinnekoti Foundation for Mental Retardation Research
Kehitysvammaliitto r.y. Minervankatu 2 A 10 Helsinki	National Welfare Association for the Mentally Deficient
Tampereen Yliopisto Kalevantie 4 33100 Tampere 10	Tampere University

PUBLICATIONS

Ketju Minervankatu 2 A 10 Helsinki 10	The Chain - Journal of the National Welfare Association for the Mentally Deficient
Läka och Lära Mannherheimintie 21-23 B 20 Helsinki 25	Heal and Teach - in Swedish
Erityinen Kottaraistie 14 D 22 Helsinki 73	Journal of Special Teachers
Sosiaalinen Aikakauskirja Ruoholahdenkatu 4 Helsinki 18	Social Review
Duodecim Runeberginkatu 47 A Helsinki 26	Journal of the Medical Association
Suomen Lääkärilehti Ruoholahdenkatu 4 Helsinki 18	Finnish Medical Journal
Tukiviesti Itsenäisyydenkatu 11 A 33500 Tampere 50	Support Message - Journal of the National Association of Societies in Aid of the the Mentally Handicapped

Sosiaaliturva
Mannerheimintie 40 C 69
00100 Helsinki 10

Social Security - magazine of
the Central Union of Social
Security

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - The Act on Mental Retardation obliges the social welfare boards of the communes to keep a register of the mentally retarded. Elementary school inspectors, teachers, members of the social welfare board, health authorities, registration authorities, etc. and the mentally retarded child's parents are by law required to inform the social welfare board about a mentally retarded child in need of care.

A person can only be registered by the commune board after a doctor has found him to be mentally retarded on the basis of personal examination. Often a specialist and psychologist make an examination to establish mental retardation and discover the level of development.

It is estimated that the total number of mentally retarded persons is about 30,000 of which about 4,700 are severely retarded, 11,000 - 12,000 moderately retarded and 13,000 - 14,000 mildly retarded. There is rather little organized consultation with parents in Finland so far.

It is the job of the local social welfare boards to see to the care of the mentally retarded. There are about 200 workers specialized in their care at present with their number increasing. Some institutions operate out-patient clinics mainly for diagnosis, but parents can also get guidance and advice about the care of their mentally retarded children there. The child guidance clinics and psychiacric care offices also give parents assistance but here too there are few workers especially familiar with the care of the mentally retarded.

Education - Special classes, not yet adequate in number, are provided in primary schools for children unable to follow ordinary instruction, and it is estimated that about 40% of these pupils are mentally retarded. Children with an I.Q. less than 50-55 are not legally obliged to attend school, but efforts are made to instruct them in residential institutions, and in the kindergarten and education sections of day care centers. In 1975 there were 89 such centers with 2,710 places, of which 1/3 were "training school" places.

Work training and employment - Work training, instruction and sheltered work are provided at the institutions for the mentally retarded and the day care centers. At the end of 1975 there were 1,540 actual work center places. There is a special office for persons capable of limited work in the Labor Exchange office, but few placements of the mentally retarded in jobs have been made since even the mildly retarded lack the necessary vocational training.

Medical care - In addition to medical services provided in the residential institutions, medical care is offered through the child guidance clinics and psychiatric care offices. General health services in Finland are well developed and health centers are available in most communities, with special emphasis on maternal and child health programs. There are about 2,100 communal child health centers serving pre-school children.

Residential care - In 1975 there were 14 central institutions which, together with smaller residential homes, provided 5,159 places. The need for institutional places is estimated at about 7,000. Most institutions are privately administered, with state and commune subsidization. Residential care within the community is only just starting in Finland. The first hostel for the mentally retarded was established in Helsinki in 1967 and has places for 12 men. At present there are about 160 places in hostels for the mentally retarded.

Finland compares with the other Scandinavian countries in excellence of new institutional design, done by outstanding private architects.

Financial assistance - Most moderately and severely retarded children are entitled to child allowances and a disability pension after age 16. Parents of low means can also get public assistance from the social welfare committees. The state and the communes share establishment and administrative costs of both institutional and day programs.

Recreation - The National Association of Societies in Aid of the Mentally Handicapped, its local supporting associations and other private organizations arrange recreational camps for mentally retarded children and their parents. Local associations also have clubs, social evenings and excursions for the retarded and their parents.

Research - Most medical research in mental retardation is done at the Rinnekoti Foundation Research Institute for Mental Retardation. Since 1961 the Institute has published a series of research reports on biological, psychological, educational and social studies. Some research is also done at several other central institutions and in the various universities and colleges, including extensive studies in the education and behavioral areas at Jyväskylä University in the Department of Special Education. The Ministry of Social Affairs made two large studies on incidence and the need for care of the mentally retarded. The National Welfare Association for the Mentally Deficient awards a small number of research grants each year for mental retardation research in various fields.

Personnel training - Since 1960 special teachers must have taken a 1-year training course following 2 years of practical experience in primary school teaching, given at the University of Jyväskylä, which also offers a 1-year course for special teachers for training schools. No specialized training in mental retardation is yet available for doctors and nurses who have mainly been trained "on the job" and in various short courses and day conferences. Personnel for day centers for the moderately and severely retarded are mainly trained in 1-year in-service courses. Two committees have been working on the training of institutional personnel and this will be organized within the next few years.

Planning - Preventative planning is done in connection with research and the activities of the general health system, family guidance, maternity and children's clinics, etc. Legislative planning is done by the Ministry of Social Affairs and the various committees appointed by the Council of State and Parliament. A committee set up by the Council in 1966 with the task of reorganizing the care of the mentally retarded, especially community care, has given several proposals and in 1977 a new law on mental retardation was expected.

OTHER INFORMATION FOR VISITORS

The general department of the Ministry of Social Affairs and Health, or the administrative office of the Board of Social Affairs can help visitors plan their program.

School holidays - Mid-June through August, Christmas and Easter.

FRANCE

With a population of 52 million and an area of 213,000 square miles, France has coastlines on both the Atlantic and the Mediterranean and shares borders with Spain, Italy, Switzerland, Germany, Luxembourg and Belgium.

The people of France are of three ethnic groupings - Nordic, Alpine and Mediterranean. The prevailing religion is Roman Catholic; less than 2% of the population are Protestants, less than 1% Jewish. Primary, secondary and higher education are free; school is compulsory for ages 6 to 16.

The constitution of the Fifth Republic provides for a two-chamber legislature, the National Assembly and the Senate, of which the former holds vastly greater power. The President is elected by popular vote for 7 years and appoints the Premier. Administratively the country is divided into 95 departments plus 4 overseas departments (Guadeloupe, Guyana, Martinique, Réunion) grouped in 22 regions.

France continues to have a strong agricultural economy with 15% of the working force employed on small diversified farms. There are extensive mineral resources and manufacturing has increased markedly during recent years.

France has an extensive and very complex system of social security measures, backed by a comprehensive network of social services which operates from the national level through regions and departments to the local community. An excellent reference for those interested in learning more about this multilevel system of human services is the volune, Social Welfare in France, a 984-page book available from La Documentation Française, 29-31 Quai Voltaire, 75007 Paris.

The National Government has responded well to the rapidly-growing associations sponsored by families with mentally retarded children, united since 1960 in UNAPEI, one of the strongest and most effective members of the International League of Societies for the Mentally Handicapped. It is noteworthy that the Government of France initiated in 1970 the resolution for adoption of the Declaration of General and Special Rights of the Mentally Retarded by the United Nations.

A national law to improve handicapped persons' lives and ensure social integration was adopted by the French Parliament in 1975. Prevention, care, education, vocational training and guidance, housing and transportation services are now coordinated by an inter-ministerial committee, assisted by a consultative council. A guaranteed minimum income is provided disabled people, either through wages for work or allowances and benefits provided by the government.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Ministère de l'Éducation Nationale 110 rue de Grenelle Paris 7e	Ministry of National Education
Ministère de la Santé 8, avenue de Ségur 75007 Paris	Ministry of Health

Direction générale de la Santé	General Directorate of Health
Direction de l'Action Sociale	Directorate of Social Action
Sous-Direction de la Famille et de l'Enfance et de la Vie Sociale	Division of Family, Children and Social Life
Sous-Direction de la Réadaptation, de la Vieillesse et de l'Aide Sociale	Division of Rehabilitation, Old Age and Social Assistance
Direction de la Sécurité Sociale	Directorate of Social Security
Sous-Direction de l'Assurance Maladie	Division of Health Insurance
Sous-Direction de l'Assurance Vieillesse et des Prestations Familiales	Division of Old Age Insurance
Sous-Direction des Accidents du Travail, des régimes sociaux et de la Mutualité	Division of Occupational Accidents
Direction des Hôpitaux	Directorate of Hospitals
Service des constructions et de l'équipement	Service of Facilities and Equipment
Service central de la pharmacie et des médicaments	Central Pharmaceutical and Medications Service
Ministère due Travail 127 rue de Grenelle Paris 7e	Ministry of Labor
Direction générale du travail et de l'emploi	General Directorate of Labor and Employment
Direction générale de la population et des migrations	General Directorate of Population and Migration

National planning or coordinating body - There is no planning and coordinating body on mental retardation per se, but mental retardation is a major part of the concern of the consultative council and the inter-ministerial committee set up in the field of rehabilitation in 1975 (see above). In the field of research, CTNERHI, the National Technical Center for Study and Research in the field of handicapping conditions (Centre Technique National d'Etudes et de Recherches sur les Handicaps et les Inadaptations) provides coordination in the study of certain problems. Regional centers (CREAI - Centre regionale de l'Enfance et de l'Adolescence Inadaptés) are semi-public organizations that advise and inform public authorities and private agencies regarding the establishment of specialized facilities.

VOLUNTARY ORGANIZATIONS

Primary concern in mental retardation
Professional

Groupement Français de Neuro-psycho-pathologie et d'Hygiene Mentale de l'Enfance c/o Professeur P.L.R. Lafon Faculté de Médecine de Montpellier 34 - Montpellier	French Group on Child Neuro-psycho-pathology and Mental Hygiene

Member of the International Association for the Scientific Study of Mental Deficiency. The First Congress of the IASSMD was held in Montpellier in 1967 under the chairmanship of Professor Lafon.

Regional

Comité d'Etudes et de Soins aux Arriérés
Profonds de la Région Parisienne
81, rue Saint-Lazare
75009 Paris

CESAP - Committee for Research and Care of the Severely Retarded in the Paris Region

Citizen (Parents and Friends)

Union Nationale des Associations de
Parents d'Enfants Inadaptés
15 , rue Coysevox
75018 Paris

UNAPEI - National Association for the Mentally Handicapped

Founded in 1960 by the union of established parents' groups (ALAPEI in the Lyon area and the network of Paillons Blancs), UNAPEI now has a membership of 65,000 families and an increasing number of affiliated members. The organization consists of 250 associations with 350 local sections. Each of the 22 Regions is represented by a regional delegate on the Administrative Council. With a headquarters staff of 30 persons and local responsibility for creation and management of 1,075 facilities, UNAPEI and its member associations have made a great impact on developments in the field of mental retardation, in legislation as well as in changing public attitudes. A founding member of the International League of Societies for the Mentally Handicapped, UNAPEI was host to the League's 1966 Congress, held in the Palais de UNESCO. The management of the 1,075 local facilities (serving 47,000 children and adults and employing a manpower of 30,000) is coordinated by an employers union, the Syndicat National des Associations de Parents d'Enfants Inadaptés (SNAPEI), a specialized branch of UNAPEI. Since 1963, UNAPEI has had official recognition as an "établissement d'utilité publique."

Association de Volontaires Franco-Américains
au Service des Inadaptés Mentaux (FAVA)
34 bis rue Vignon, Paris 8e

Association of Franco-American Volunteers Serving the Mentally Retarded

Initiated by Eunice Kennedy Shriver in 1968, FAVA has promoted recreation and sports for retarded young people, including annual Special Olympics.

Other organizations which include mental retardation

Association Française pour la Sauvegarde
de l'Enfance et de l'Adolescence
28 place Saint Georges
Paris 9e

AFSEA - French Association of Organizations for the Safeguard of Youth

Union Nationale Interfédérale des
Oeuvres Privés Sanitaires et Sociales
103 rue du Faubourg Saint Honoré
Paris 8e

UNIOPSS- National Interfederal Union of Private Health and Social Agencies

Association Nationale des Communautés Educatives 145 boulevard Magenta, Paris 10e	ANCE - National Association of Children's Communities
Union Nationale des Assistants et Educateurs de l'Enfance 89, rue due Cherche-Midi 75006 Paris	UNAEDE - National Association of Child Care Workers and Assistants
Association Nationale des Assistantes de Service Social 3 rue de Stockholm Paris 8e	ANAS - National Association of Social Workers
Fédération des Sociétés de Croix-Marine 59 rue de Châteaudun Clermont-Ferrand - 63000	Federation of Blue Cross Societies
Service de Pédagogie Catéchetique Specialisée,Centre National d'Enseignement Religieux 19 rue de Varenne Paris 7e	Service of Special Catechistic Pedagogy, National Religious Education Center
Groupe de Recherche et d'Action des Profesionnels de Foyers d'Adultes Handicapés 45 bis rue des Brieux 38120 St Egrève	GRAPFAH- Research and Action Group of Workers in Hostels for Handicapped Adults
Association Nationale des Directeurs d'Etablissements et Services pour Handicapés 15 Avenue des Tilleuls 94320 Thiais	ANAESI- National Association of Directors of Facilities and Services for the Handicapped
Association Nationale des Educateurs de Jeunes Inadaptés 27 rue de Maubeuge 75009 Paris	ANEJI- National Association of Workers for Maladjusted Children
Association Internationale des Educateurs de Jeunes Inadaptés 66, chausée d'Antin 75009 Paris	AIEIJ - International Association of Workers for Maladjusted Children
Association de Placement et d'Aide pour Jeunes Inadaptés 20 rue Ferrus 75014 Paris	APAJH - Association for Placement and Aid to Maladjusted Children
Office Catholique des Handicapés 11, rue François Mouthon 75015 Paris	OCH - Catholic Office for the Handicapped

RESEARCH

Centre Technique National d'Etudes et de Recherches sur les Handicaps et les Inadaptations 27, Quai de la Tournelle 75005 Paris President - Professeur Fontan Director - Monsieur Levy	CTNERHI - National Technical Center of Handicapped Children and Youth (attached to the Ministry of Public Health and Social Affairs)
Institut National de la Santé et de la Recherche Médicale Unité de Recherches médico-sociales "Les Pins" Montpellier	National Institute of Health and Medical Research Medico-social Research Unit "Les Pins"

See also brief notes.

PUBLICATIONS

Specialized journals which frequently publish articles on mental retardation

Revue de Neuro-Psychiatrie Infantile
15 rue Saint-Benoit, Paris 6ème

Cahiers de l'Enfance Inadaptée
5 rue Palatine, Paris 6e

Union Sociale
103 rue du Faubourg St Honoré, Paris 8ème

Réadaptation
10 rue de Sèvres, Paris 7e

Revue Pratique de Psychologie de la Vie Sociale et d'Hygiène Mentale
59 rue de Châteaudun
Clermont-Ferrand (Puy de Dome)

Action Educative Specialisée
(Cahiers de l'UNAEDE)
89, rue du Cherche-Midi, 75006 Paris

Recherches
Service Catholique de l'Enfance et de la Jeunesse Inadaptées
19 rue de Varenne, 75007 Paris

Ombres et Lumières
Office Catholique des Handicapés
11 rue François Mouthon 75014 Paris

Sauvegarde de l'Enfance
28 Place Saint-Georges, 75442 Paris

ÉPANOUIR
15 rue Coysevox, 75018 Paris

Bibliography - "Bibliographie des ouvrages et articles de langue francaise sur arriération mentale, débilité, déficiences intellectuelles et oligophrénies chez l'enfant," edited by the CREAI of Paris, 20 rue Euler, Paris 8e, price 10 f.

TERMINOLOGY

Terminology generally in use: Déficients mentaux, arriérés mentaux, insuffisants mentaux, inadaptés.

Débiles légers simples	- I.Q. 65/70 to 85
Débiles légers avec troubles associés	- I.Q. 65/70 to 85
Débiles moyens	- I.Q. 70-50
Débiles profonds	- I.Q. 50-30
Arriérés profonds	- Below 30 I.Q.

The I.Q. limits given above are listed only as a sample reference, many other elements being involved in classification and assessment.

The Ministry of National Education has responsibility during school age for débiles légers and the more capable débiles moyens. All other services come within the domain of public health and social action programs, health authorities being particularly concerned with the arriérés profonds.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents - There are infant consultation centers available throughout the country. If a child shows abnormalities he is referred to a specialized medical center. Child mental hygiene centers will deal with the problem of mental retardation. In Paris CESAP (see above) provides consultation centers for severely retarded children in six hospitals. UNAPEI makes a special effort to contact and provide consultation to parents of young children.

Education - The new law adopted in 1975 recognizes the right of handicapped children and adolescents to an education and the obligation of the government to assume the costs, whether the instruction is provided in regular or special classes run by the state or by private non-profit organizations. Children of borderline intelligence and the more capable of the mildly retarded generally attend classes de perfectionnement in the ordinary schools. Some may go to medical-pedagogical institutes, day or residential, but these are primarily for the more handicapped, both the débiles moyens of less ability and the débiles profonds. Instituts médico-pédagogique (IMP) are managed by voluntary organizations, private persons, or may be attached to a psychiatric hospital. The educational emphasis is on specialized psycho-motor and social training (rééducation).

Work training and employment- After age 14, vocational training in classes professionels is provided in ordinary schools and in the 30 Ecoles Nationales de perfectionnement (day or residential, or both). Adolescents who have attended the IMPs receive their training in an Institut médico-professionnel (IM Pro) from 14 to 18 or 20 years of age. To provide long-term sheltered employment, the parents associations have provided 222 Centres d'Aide par le Travail, with a total of 12,265 places. (In the 727 IMP and IM Pro establishments of UNAPEI, 30,350 youngsters from age 5 to 20 years are served.)

Medical care - The medical needs of the mentally retarded have been highlighted by the requirement that all the aforementioned facilities must have an attending physician in order to qualify for government subsidies. In recent years there has been increasing interest and participation by pediatricians in the mental retardation field, which formerly was seen primarily as the province of psychiatry.

Residential care - The largest share of specialized residential care for the retarded is provided in the IMP and IM Pro establishments. Some retarded children are to be found in psychiatric hospitals. There is a very critical shortage in residential care for the retarded adult. UNAPEI has led in making a beginning to provide small community residences (foyers) for adults; there are now 126 with 4,036 places and a number under other voluntary auspices, as for example, the outstanding programs under leadership of Jean Vanier,"L'Arche",started in Trosly Breuil,based on small groupings of adults and young adults in normalized surroundings.

Recreation - Scouting, social clubs, holiday residential and day camping programs have been developed extensively,and during recent years the Special Olympics project has been received with much enthusiasm in France.

Research - There has been growing interest in mental retardation research, both in the biological and the behavioral sciences. The international acclaim of Lejeune's discovery of the chromosomal abnormality in Down's syndrome has underlined the importance of mental retardation as a field of research. Particularly notable has been the comprehensive research approach of Lafon and his colleagues at the University of Montpellier.

Personnel training - France has probably developed the most extensive program of diversified training of personnel working with handicapped persons in general, and the mentally retarded in particular. Besides the instituteurs spécialisés (special teachers) and jardinières d'enfants spécialisées (special kindergarten teachers), the éducateurs spécialisés (child care worker or counsellor) and moniteurs-éducateurs (special aides) are of particular significance since they assure a basic quality of care in residential and day facilities. (The difference between the last named is that the éducateur spécialisé has higher entrance requirements plus a 3-year rather than a 2-year training period.)

Services for retarded persons without parents - UNAPEI has developed two programs to assist mentally retarded persons after their parents' deaths: a special life insurance policy taken out by the parents assures predetermined monthly payments for the surviving son or daughter; "associations tutélaires," now some 60 throughout the country, provide protective and guardianship services for retarded individuals without parents, depending on individual need and administrative determination.

Planning - A major characteristic of post-war public affairs in France has been the succession of national 5-year plans affecting every aspect of economic and social life. Through the growing influence and effectiveness of UNAPEI and of AFSEA,(the Association Française pour la Sauvegarde de l'Enfance et de l'Adolescence) these plans have increasingly reflected the needs of the mentally retarded.

OTHER INFORMATION FOR VISITORS

Requests for information may be directed to:

Sous-Direction de la Réadaptation, de la Vieillesse
et de l'Aide Sociale

Sous-Direction de la Famille et de l'Enfance et de
la Vie Sociale

Ministère de la Santé
8, avenue de Ségur
75005 Paris

UNAPEI will also give assistance and information:

Union Nationale des Associations de
Parents d'Enfants Inadaptés
15, rue Coysevox
75018 Paris

School holidays - In general, facilities are closed during July and August and 1 to 2 weeks over Easter and Christmas.

GERMAN FEDERAL REPUBLIC

(WEST GERMANY)

Including West Berlin, the Federal Republic of Germany covers 95,928 sq. miles and has a population of more than 61 million. There is an upper and lower house in the Federal Parliament (Bundesrat and Bundestag); the Federation consists of eleven states (Länder) including West Berlin. 78% of the population is urban with a general population density of 622 persons per square mile. Predominantly Protestant are North Germany and West Berlin, while Bavaria and the Rhineland are largely Roman Catholic. Following its remarkable post-World War II recovery, the country has become a major industrial producer.

Education is the responsibility of the individual Länder, the majority requiring 9 years of schooling beginning at age six. Along with education, the administration of health and welfare services are largely within the jurisdiction of the Länder, and striking differences exist from Land to Land. However, three basic Federal statutes provide a social security framework, the laws on social insurance, on pensions and on social assistance. Although these laws are fairly recent enactments, nationwide social insurance legislation dates back to the 1880s.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Federal

Bundesministerium für Arbeit und Sozialordnung 53 Bonn	Ministry of Labor and Social Affairs
Bundesministerium für Jugend, Familie und Gesundheit 53 Bonn	Ministry of Family, Youth and Health
Bundesministerium des Innern 53 Bonn	Ministry of the Interior

Land

The government structure, including names and functions of ministries, differs from Land to Land. For information, write to the appropriate Federal Ministry, or to the Bundesvereinigung Lebenshilfe für geistig Behinderte (see below). There is no education authority on the federal level; in the Länder the Kultusministerien are the responsible agencies.

VOLUNTARY ORGANIZATIONS

Citizen and Professional

Bundesvereinigung Lebenshilfe für geistig Behinderte ("Lebenshilfe")
(National Ass'n for the Mentally Handicapped - "Help for Living")
Raiffeisenstrasse 18, 3550 Marburg - Cappel, Postfach 80

Founded in 1958, Lebenshilfe now has more than 75,000 members (parents, professional workers, local and state officials and interested citizens) in its 400 associations, organized on local, district and state levels. It is a member of the International League of Societies for the Mentally Handicapped and maintains liaison with the International Association for the Scientific Study of Mental Deficiency. Over the years Lebenshilfe has become a most effective spokesman for persons with mental retardation. Working closely with government on both Land and Federal levels it has helped to bring about important legislation, as well as social and financial benefits to individuals.

Other national organizations providing residential and other services

Verband evangelischer Einrichtungen für geistig und seelisch Behinderte e.V.
Stafflenbergstr. 76, 7 Stuttgart 1

Verband katholischer Einrichtungen für Lern- und Geistigbehinderte
Postfach 420, 78 Freiburg

National social welfare organizations with specific concern for mental retardation

Arbeiterwohlfahrt Bundesverband
(National Ass'n for the Welfare of Workers)
Ollenhauerstr. 3, 53 Bonn

Das Diakonische Werk, Innere Mission und Hilfswerk der evangelischen Kirche in Deutschland
(The Deacons' Assistance Program, Home Missions and Assistance Work of the German Evangelical Church)
Stafflenbergstr. 76, 7 Stuttgart 1

Deutscher Caritasverband
(German Associated Charities - Roman Catholic)
Karlstr. 40, 78 Freiburg

Deutscher Paritätischer Wohlfahrtsverband
(German Non-sectarian Ass'n)
Heinrich-Hoffmann-Str. 3, 6 Frankfurt/Main

Deutsches Rotes Kreuz
(German Red Cross)
Friedrich-Ebert-Allee 71, 53 Bonn

Other national organizations

Bundesarbeitsgemeinschaft der Freien Wohlfahrtspflege
(National Coordinating Committee on Voluntary Welfare Services)
Franz-Lohe-Str. 19
53 Bonn

Bundesarbeitsgemeinschaft Hilfe für Behinderte
(National Coordinating Committee on Assistance to the Handicapped)
Kirchfeldstr. 149, 4 Düsseldorf

Bundesarbeitsgemeinschaft der überörtlichen Sozialhilfeträger
Warendorfer Str. 26, 44 Münster/Westf.

Hilda-Heinemann-Stiftung
Regerstr. 5, 1 Berlin 33

Stiftung "Hilfswerk für behinderte Kinder"
Lessingstr. 4, 53 Bonn-Bad Godesberg

Stiftung für das behinderte Kind
Schuhmarkt 4, 3550 Marburg/Lahn

Bundesarbeitsgemeinschaft für Rehabilitation
(National Coordinating Council on Rehabilitation)
Eysseneckstr. 55, 6000 Frankfurt/Main 1

Bundesarbeitsgemeinschaft Werkstätten fur Behinderte in der BRD e.V.
(National Coordinating Council on Sheltered Workshops)
Allerstr. 45, 5303 Bornheim-Hersel

Verband Deutscher Sonderschulen
(Union of German Special Schools)
Im sonnigen Winkel 2
7257 Ditzingen b. Stuttgart

Anthroposophische Gesellschaft
(Anthroposophic Society)
Rudolf-Steinder-Haus
Zur Uhlandhöhe 10, 7 Stuttgart 1

Deutsche Gesellschaft für Jugendpsychiatrie
(German Society for Child Psychiatry)
Hans-Sachs-Str. 4-6, 355 Marburg/Lahn

Deutsche Vereinigung für die Rehabilitation Behinderter
(German Ass'n for Rehabilitation of the Disabled)
Friedrich-Ebert-Anlage 9, 69 Heidelberg 1

Aktion Sorgenkind
(Action for the Handicapped Child)
Franz-Lohe-Str. 19, 53 Bonn

Deutscher Verein für öffentliche und private Fürsorge
(German Ass'n for Public and Private Welfare)
Am Stockborn 1-3, 6 Frankfurt/Main 50

Bundeszentrale für gesundheitliche Aufklärung
Ostmerheimer Str. 200, 5000 Köln 91

Stiftung Rehabilitation
(Rehabilitation Foundation)
Bonhoefferstr., 69 Heidelberg 1

PUBLICATIONS

Publications of the Lebenshilfe

Zeitschrift Lebenshilfe
Verlag Lebenshilfe
Postfach 1486, 3550 Marburg 7

Quarterly of the National Association "Lebenshilfe"

Other publications include Letters to Parents, book series of study conference reports, a handbook on workshops and a large number of public information brochures.

Other journals which include material on mental retardation

Zeitschrift für Heilpädagogik - 3070 Nienburg
Sonderpädagogik - Berlin
Die Rehabilitation - Heidelberg
Nachrichtendienst des Deutschen Vereins für öffentliche und private Fürsorge - Frankfurt
Blätter der Wohlfahrtspflege - Stuttgart
Das behinderte Kind - Düsseldorf

Directories

"Verzeichnis der Heime und Anstalten," a directory of residential homes and institutions, is available from Verlag Lebenshilfe.

"Verzeichnis der Werkstätten für Behinderte in der BRD," a directory of workshops for the handicapped in the FRG, published by BAG für Rehabilitation, Eysseneckstr. 55, 6000 Frankfurt/Main.

"Die sonderpädagogischen und ähnliche Einrichtungen in der Bundesrepublik und West-Berlin," a directory of special education and similar facilities, published by Verlag Carl Marhold, 1 Berlin-Charlottenburg 9.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents - Specialized medical examinations, counselling and treatment of the mentally retarded is done mainly by pediatricians, child and youth psychiatric clinics and the local health centers, as well as diagnostic centers for handicapped children, the number of which are increasing. Public health services are under the control of the "Länder," as are the measures of early diagnosis. Local public health authorities are legally under obligation to procure counselling services for parents of handicapped children. In most cases they refer parents to diagnostic and counselling services of other public or private bodies. The system of statutory routine examinations in the first year of life, in the second and in the fourth years of infants, provides a still better way to plan early stimulation measures and programs, in which the mother of the handicapped child has to fulfill important tasks.

The approximately 400 local Lebenshilfe societies carry much responsibility for parent counselling; in addition to its quarterly publication which covers all areas of concern, the National Association Lebenshilfe publishes quarterly "Letters to Parents" with detailed suggestions for home training.

Education - Special education for mentally retarded children existed in various cities already at the turn of the century; some of the schools served not only mildly but also moderately and severely retarded children. Whatever programs existed were brought to a halt when Hitler came to power. After World War II these programs were resumed only slowly, with great differences between the "Länder" and at first only for the mildly retarded. For the moderately and severely retarded, day centers with educational programs were developed by the Lebenshilfe and other voluntary agencies, and in some cases, local authorities. At present most of the approximately 1,500 day-care facilities for moderately and severely mentally retarded children are being run by private associations, especially by the Lebenshilfe. They serve 80,000 moderately and severely mentally retarded children.

The Education Acts of the 11 "Länder" also provide for compulsory school education of mentally retarded children (I.Q. below 60) from 6 to 15 years of age, which can be extended for some years (in one Land up to the age of 25). Costs of material and personnel for these schools are covered by the government. Local communities are responsible for schools but in all "Lànder" associations such as the Lebenshilfe may also run schools. If private agencies assume the responsibility, the costs are mostly covered by the state.

Most cities have kindergarten programs for the mentally retarded, the majority under Lebenshilfe auspices. At present there are approximately 450 special kindergartens providing for about 6,000 children.

Work training and employment - are provided in pre-workshop facilities for work training, and in sheltered workshops. In general, these are maintained by the Lebenshilfe associations, but some are under other voluntary organizations as well as local authorities. The number of such facilities has increased dramatically since 1962, from 17 to 300, providing training and work for about 24,000 mentally retarded persons (out of a total of 30,000).

Medical care - Periodic health examinations are provided by the public health departments, but routine medical care is left with the family physician or pediatrician. All pre-, peri- and post-natal measures for diagnosis of handicaps come under the terms of the statutory pregnancy medical care and of the statutory routine examination of infants. Genetic counselling centers at universities are increasingly used by the population. The examinations are voluntary and not legally binding, with the exception of the routine mass-examination for early diagnosis of PKU. Free prophylactic examinations of infants in all "Lander" consist of 7 examinations during the first four years of life. A system of compulsory registration of all handicapped persons has often been discussed, but so far not implemented.

Residential care - At present there are almost 130 community-based hostels with approximately 3,100 places. Furthermore, there are a great number of homes and institutions in the residential field. However, there is still a great shortage of hostels in the communities. The major part of residents in hostels work in workshops for the handicapped.

Financial assistance - has been established as a right since 1962 with the implementation of the new Federal Social Assistance Act (BSHG); it includes payment for rehabilitation services, medical treatment, home nursing and vocational training, and covers all age groups, and assures each mentally retarded person the right of integration. The right to claim this "integration assistance" or other help, and the amounts granted, are dependent on the basic income of the family. Important integration measures, such as attendance at special kindergartens, special schools and training in workshops for the handicapped, are free, apart from sharing the costs of food, etc.

Recreation - Leisure time and recreation activities for mentally handicapped children, adolescents and adults and their parents are organized by the local and district societies of the Lebenshilfe and other similar organizations (individual and group activities, and mother-child vacations.)

Research - Medical research is undertaken at various university hospitals; of particular significance is the PKU work of Bickel at Marburg and now Heidelberg. In psychological studies Bondy and his associates have pioneered at the University of Hamburg, particularly in the development of new testing instruments. The steady extension of school programs for the retarded has led to studies in the area of curriculum.

The Scientific Advisory Council of the Lebenshilfe, which has a broad inter-disciplinary representation, has begun a program to stimulate research efforts and to secure supporting funds from private, state and federal sources.

Personnel training - Training of staff for all facilities and services is provided by a variety of training institutions. Trained teachers and special therapists who want to be employed in schools for the mentally handicapped (I.Q. below 60) formerly had to study 2 additional years at university or institutes of special education at teacher training colleges. This has now been replaced by independent 8-term courses. Other teachers who have completed special education courses can be employed as school assistants or special educators after having completed specialized in-service courses for educational tasks in facilities for the mentally retarded. Such courses, which are also being organized by volunteer associations for personnel in residential facilities, generally cover 2 full years of in-service training and 1 additional year of professional training. Furthermore there are courses for assisting staff to teachers, school assistants or special educators, especially for nursing and technical functions.

In addition to these training facilities, Lebenshilfe and some other volunteer associations offer a large number of 1 to 2 week courses in special subjects or techniques related to educational and technical tasks in facilities for the mentally retarded. Included are courses for parents and volunteers, special courses for staff members in hostels, as well as for leisure time activities. Finally, Lebenshilfe offers training courses for leading technical staff (240 hours) and group leaders (320 hours). The courses are based on legal regulations for the organization of sheltered employment and can be carried out as in-service training, full course or a combination of both. All courses are run with state-subsidies.

Planning and coordination-In its early years the national association Lebenshilfe was a most significant source for nationwide planning and coordination. With the rapid growth of education, health and welfare services for the retarded there is an increasing effort to coordinate legislation and programming for the retarded with that for other types of disability, particularly through the Bundesarbeitsgemeinschaft Hilfe für Behinderte (National Coordinating Committee on Assistance to the Handicapped) and the other organizations listed above.

Plans are being discussed in West Germany to regionalize diagnostic and other services in the field of mental health. The German rehabilitation system includes coordinating bodies on different levels - ministries, public auhorities, agencies which are financially responsible for rehabilitation, private welfare organizations, organizations for the handicapped, parents' organizations, professional organizations, the handicapped themselves, foundations, day care and residential facilities and, on state level, planning committees to work together to improve help for the mentally retarded.

OTHER INFORMATION FOR VISITORS

Information can be requested from the Federal Ministries or from Lebenshilfe, which has available information leaflets, will give advice on specific programs and facilitate arrangements for visits.

School holidays - The summer school vacation period is generally 6 weeks in length, varying in the different "Länder," during the months of July - September.

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GHANA

The Republic of Ghana, with an estimated population of 9.6 million in 1974, occupies an area of 92,100 square miles on the West Coast of Africa. An independent state since 1957, Ghana had a stormy history during its first decade, culminating in a revolt of the Army which in 1966 overthrew the regime of President Kwame Nkrumah. Periods of military and of civilian government followed. Since 1972 the Head of State has been General I.K. Acheampong, Chairman of the Supreme Military Council.

Rich in minerals and timber, and the world's leading cocoa producer, Ghana also has taken great strides to develop its industrial capacity. The completion of the hydroelectric project on the Volta River has made this possible.

The people of Ghana represent many ethnic groups and more than fifty different languages and dialects are spoken, but during the many years of British colonial rule both the English language and the English education system became widespread.

GOVERNMENTAL AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Health
P.O. Box M. 44
Ministry Branch Post Office
Accra

Ministry of Education and Culture
P.O. Box M. 45
Ministry Branch Post Office
Accra

Ministry of Labour and Social Welfare
Social Welfare and Community Development Section
P.O. Box 778
Accra

It is noteworthy that the activities of the Society of Friends of Mentally Retarded Children, and in particular its first major project of national significance, the construction of a residential home for mentally retarded children, was very materially aided by public support during its early years from Mr. J.W.K. Harlley, Deputy Chairman of the National Liberation Council, and more recently by General Acheampong, and the Asantehene, Otumfuo Opoku Ware II, who is a Patron-in-Chief.

VOLUNTARY ORGANIZATIONS

Society of Friends of Mentally Retarded Children
P.O. Box 640
Accra

Founded in March 1968, and since 1970 a member of the International League of Societies for the Mentally Handicapped, the Society has been the driving force in gaining services for mentally retarded children in Ghana. It operates through its two branches in Accra and Kumasi (established in 1975), the two main cities of the country.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - The Society maintains in several places counselling services for which several psychiatrists, physicians and social workers have volunteered their services. This represents an as yet limited but important first step.

Education - Until compulsory schooling for all children can be introduced, it is not expected that the education authorities will organize special education for mentally retarded children. However, planning and teacher training have been started.

In 1969, the Society of Friends of Mentally Retarded Children opened a day nursery at the Accra Community Center. This was the first education program for retarded children in the country. The nursery (which has since grown into a school) was moved into the Home when that was completed in 1970. Since 1974 the Ministry of Education has taken over the running of the Home and School in Accra under the direction of a Board of Governors on which the Society has a strong representation.

Residential care - Before 1970 the Mental Hospital in Accra, built to accommodate 600 patients but actually housing over 2,000, had among its population many mentally retarded individuals and in particular young retarded children. The very unfavorable conditions under which the children lived caused the Society of Friends of Mentally Retarded Children to make a small Home to house these children its first major project. The Home, planned to accommodate eventually 100 children, was erected with funds solicited by the Society and supplemented by substantial grants from the Government, as well as "Brot für die Welt" (of the Federal Republic of Germany).

Recreation (Leisure time programs) - The Society undertakes to provide some recreational activities both for the retarded children living in the Mental Hospital and those living in the Home and School in Accra. At present most of the severely retarded are still housed in the Mental Hospital in Accra, while children considered educable are accommodated in the Home. The Society also tries to have 3 or more of its members visit the children in each of these institutions at least once a week (on Wednesdays).

Personnel training - None exists as yet, but it is recognized as an urgent priority. Initial steps have been taken in the area of specialized teacher training,e.g. through an exchange with the University of Southern Illinois in Carbondale, U.S.A. and the University in Accra.

OTHER INFORMATION FOR VISITORS

Requests for information and assistance in planning visits can be addressed to any of the Ministries listed, or the Society.

School holidays - Vacation time in Ghana is from mid-July or August to mid-September, mid-December to mid-January and mid-April to mid-May.

GREECE

Area - 51,000 square miles; population - 9.1 million. The government is a parliamentary republic with an elected, unicameral legislature, a premier and a president. A new Constitution was adopted in June, 1975. The years since 1967 had seen the overthrow of the constitutional monarchy, periods of military rule and politcal unrest, with relationships to Turkey and the island of Cyprus being a central problem. The government is highly centralized; there are 52 provinces governed by Nomarchs. The language is Greek; the religion is Greek Orthodox.

Greece is a mountainous country with many islands. It is chiefly agricultural although only one-fourth of the total area is arable. Under American aid programs after World War II, Greece's industrial and agricultural potential greatly increased. Tourism and a large merchant marine fleet are the latest developed important national income resources. Greece is expected to become a full member of the European Community in 1978.

In 1964 the period of compulsory schooling was increased from 6 to 9 years. There is no central administrative body responsible for all special education programs. Greek family life is strong and programs to aid children are more fully implemented than other areas of public assistance. The social insurance scheme, which covers about 2 million wage earners, provides old age and disability pensions and medical care.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ypourgeion Koinonikon Ypiresion Aristotelous and Stournara Athens	Ministry of Social Services

The Department of Social Assistance ("Dieuthynsis Antilipseos") has supervisory responsibility for special boarding schools (private) for mildly and moderately retarded children.

Ypourgeion Ethnikis Paideias kai Thriskevmaton Mitropoleos 15 Athens	Ministry of National Education and Religion

This ministry is responsible for 2 day schools for mildly retarded children.

Official Agencies

Patriotikon Idryma Koinonikis Pronoias kai Antilipseos (P.I.K.P.A.) A. Tsoha 5, Ampelokipoi, Athens	National Foundation for Social Welfare and Assistance

P.I.K.P.A. was founded in 1914. It is an official organization under the Ministry of Social Services. Its purposes are care of mothers and children (study and treatment of any problems, assistance to preserve healthy environment, preventive health and hospital activities); support of nutrition of mothers and children when needed; education of specialized personnel. All these are achieved by the medical and social centers and the travelling medical units of P.I.K.P.A. throughout Greece. Directly related to mental retardation problems are the following institutions supported and run by P.I.K.P.A.:

Dimosion Paediatrikon Neuropsychiatrikon Nosokomeion Daou Penteli, Attica	Public Pediatric Neuropsychiatric Hospital, outside Athens

This is a 200 bed hospital for retarded and mentally ill children up to 16 years of age. It has a child guidance clinic in Athens (Iatropaidagogikos Stathmos, 25a Solomou Street), for evaluation and follow-up.

Kentron Eidikis Perithalpseos Paidon Lerou (P.I.K.P.A.) Leros	Center for Special Treatment of Children, on the island of Leros

Founded in 1961, with a capacity of 400 beds. Admits children up to 18 years of age with severe physical and mental handicap.

Kentron Prostasias Paidon P.I.K.P.A. (Dorea E. and A. Mihalinou) Piraeus, Athens	Center for Protection of Children - Donation of E. and A. Mihalinos

Founded in 1961, the Mihalinos Center has a child guidance clinic, a special nursery pre-school for retarded children, a small in-patient unit for children of school age, and an EEG laboratory.

Kentron Apokatastaseos Anapiron Paidon Voulas (P.I.K.P.A.)	Center for Rehabilitation of Handicapped Children, in Voulas

Founded in 1954, this large establishment offers medical care and physiotherapy to 400 physically handicapped children to 12 years of age; 100 beds are set aside for children with cerebral palsy and mental retardation.

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Citizen

Panellinios Enosis Goneon kai Kidemonon Aprosarmoston Paidon 141 Leoforos Pentelis Halandri, Athens	Panhellenic Union of Parents and Guardians of Mentally Handicapped Children

Founded in 1960 with support from the Center for Mental Health (58 Notara

Street, Athens), it supports "Stoupatheion," a special school for retarded children, at the above address. It is in contact with several parents' groups in other parts of the country and has some international contact.

Other

Elliniki Etaireia Prostasias Anapiron Paidon (E.L.E.P.A.A.P.) 16 Kononos Street, Pangrati Athens	Hellenic Society for Disabled Children - Founded 1937, member, Rehabilitation International
Spastics Society 45 Archimedes Street, Pangrati Athens	Founded in 1972, its Chairman is Prof. Spyros Doxiadis.
Social Work Foundation 7 Peta Street, Athens	Opened a Rehabilitation Center for Spastic Children in 1973.

These programs for children with cerebral palsy include some special day classes and other services for those who are also mentally retarded.

PUBLICATIONS

The parents' association publishes a journal The Unadjusted Child; occasional articles appear in P.I.K.P.A.'s Mother and Child and in some professional journals.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Early case finding is done through well baby clinics of P.I.K.P.A. The program of PKU detection with the Guthrie test is preformed in most maternity units in Athens, sponsored by the Institute of Child Health. Diagnosis and assessment can be caried out at various outpatient pediatric and neurological clinics. Since 1958 the Child Guidance Clinic of the Center for Mental Health has provided diagnostic and consultation service for mentally retarded children and their parents.

Education - Unless retarded children have other special proglems they attend the ordinary school classes where the teacher may group them separately and try to adapt instruction to their mental level. Although the special "prototype" public school in Athens has been in existence since the early 1960's and a second one has been established, their resources are limited. The concept that educational rather than medical care is needed has been slow to be accepted. Some of the existing facilities are:

Protypon Eidikon Scholeion Athenon Solomonidou 62, Kaisariani Athens	(Prototype Special [Day] School of Athens under the Ministry of Education)

For 150 mildly retarded children, a large number of whom are in foster care.

Kentron Therapeutikis Pedagogikis "Stoupatheion"
Leoforos Pentelis 141, Halandri, Athens

A day school supported by the Parents' Association and the Center for Mental Health which serves about 70 moderately retarded children and adolescents. Mrs. Likia Pistikidoy is Principal.

Idryma Prostasias Aprosarmoston
Paidon-Theotokos
Agioi Anargyroi, Attica

Theotokos - Foundation
for the Protection of
Retarded Children

A boarding school with some day pupils which serves borderline and mildly retarded children.

Psycologikon Kentron B. Hellados
Retziki, Thessaloniki

Psychological Center for
Northern Greece

This was started after World War II with contributions from various countries, by the present director, Mrs. Tutula Nanakos. It combines a diagnostic and counseling service with a day and boarding school primarily for mildly retarded children. The buildings were designed by an internationally renowned Viennese architect, and contacts with sponsoring groups in Sweden, Switzerland, Germany and other countries are maintained.

Some schools have been opened under voluntary auspices in other cities, e.g., Larisa and Patrai.

Work training - This is also a very poorly developed area. Practical training in living is emphasized in the existing facilities. No special provisions exist for employment of retarded persons. There are no sheltered workshop programs for the mentally handicapped in Greece.

Medical services - Specialized services are available in the facilities described; otherwise retarded persons use the same services as other people.

Residential care - Only a small number of residential institutions exist. In addition to those listed above supported by P.I.K.P.A., there are a few private boarding schools for mildly retarded children and a few proprietary, medically oriented programs for retarded and mentally ill children. Retarded adults in care are in psychiatric hospitals.

Financial assistance - Families who foster severely retarded children or mildly retarded children with severe behavior problems receive additional financial assistance by the state. There is no assistance given to families whose own children are retarded and living at home. Financial state assistance is provided for board in institutions.

Research - Some research on mental retardation is carried out by the Pediatrics Departments of the 2 Medical Schools at the Universities of Athens and Thessaloniki, and by the Institute of Child Health (Instituton Ygeias tou Paidiou, Athens 608) and the Center for Mental Health (58 Notara Street, Athens). There is no research institute, however, with a major interest in mental retardation.

Personnel training - Specialized training is generally obtained abroad.

Planning - Special Education legislation is being prepared and draft laws are under consideration.

OTHER INFORMATION FOR VISITORS

This can be requested from:

Ypourgeion Proedreias Kiverniseos (Ministry to the Prime Minister)
Palaia Anaktora
Athens

Dieuthynsis Morphotikon Scheseon (Department of Cultural Relations and Studies)

School holiday periods:

December 23 - January 8; One week before and one week after Greek Orthodox Easter; mid-June to mid-September.

GUATEMALA

Note: In 1976 an earthquake killed 20,000 persons and left over 1 million homeless. Specific information on the degree this catastrophe has affected services for the mentally retarded was not available in time for inclusion in this report.

Area - 42,000 square miles; population - 6 million; government - republic with unicameral congress.

The center of the Mayan Indian empire a thousand years before Spanish colonization, Guatemala is the northernmost and most populous of the Central American states. Its population is growing at a rate of 3.1% yearly; about half are of pure blooded Mayan Indian descent, the rest largely mixed Spanish and Indian. Illiteracy is estimated at 60%; Spanish is the official language but Indian languages are spoken in many rural areas where about 65% of the people live. The land is very fertile and the economy largely dependent on agricultural exports. Guatemala City, the capital, has a population of 717,300. Wide disparities of income distribution exist; there have been political instability and serious economic and public health problems.

In addition to programs provided by the Ministry of Public Health, the government social security program (Instituto Guatemalteco de Seguridad Social) operates health and rehabilitation facilities, with coverage for accidents, maternity benefits and common diseases of workers and their dependents. Life expectancy is estimated at 49 years and infant mortality about 50% for children under 5 years of age.

Primary education is compulsory and free from 7 to 14 years, but in rural districts and areas of traditional native culture many children have only 3 years or less; an active program of school building is being promoted. About 2% of the population has completed one or more years of university work, mainly at the University of San Carlos, one of the oldest universities in the Americas, founded in 1679. Two new universities have been opened in the last 20 years.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Ministerio de Salud Pública Departamento de Salud Mental Palacio Nacional, Zona 1	Ministry of Public Health Mental Health Department
Ministerio de Educación Pública Sección de Educación Especial Palacio Nacional, Zona 1	Ministery of Education Special Education Department
Ministerio de Trabajo y Asistencia Social Instituto Guatemalteco de Seguridad Social	Ministry of Labor and Social Welfare Guatemalan Social Security In- Institute

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Citizen and professional

Instituto Neurológico de Guatemala

Oficinas: Edificio Briz, 203 6 a Av. 14-33, Zona 1	Centro Psico-pedagógico: Chalet "Villacé" 2 a. Calle 34-15, Zona 7

The Instituto Neurológico was founded in 1961 as a private, non-profit organization, sponsored by parents, other citizens and professional groups. Its Association of Parents is affiliated with the International League of Societies for the Mentally Handicapped.

Other voluntary organizations which include mental retardation

Consejo de Bienestar Social 1 a "C" 4-43, Zona	Social Welfare Council
Comité Nacional Pro Ciegos y Sordo-mudos 9 a Calle 3-07, Zona 1	National Committee for the Blind and Deaf
Liga de Hygiene Mental 4 a "C", 0-27, Zona 1	League for Mental Health

RESEARCH

Departamentos de Neurología Pediatrica y de Fisiatría Roosevelt Hospital Carretera Roosevelt, Zona 11	Departments of Pediatric Neurology and of Physical Medicine
Instituto Neurológico de Guatemala 6 a Ave. 14-33, Zona 1	Neurological Institute of Guatemala
INCAP - Instituto de Nutrición de Centroamérica y Panama Unidad de Crecimiento y Desarrolo Carretera Roosevelt, Zona 11	Institute of Nutrition of Central America and Panama Growth and Development Unit

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents - The Instituto Neurológico provides diagnostic and consultation services for children accepted in its center and for others, and also provides some consultation and evaluation services to other centers through the professionals affiliated as volunteers with the Instituto. The Department of Pediatric Neurology of Roosevelt Hospital provides diagnosis and counseling; some mentally retarded persons are seen at the Mental Health Clinic and the Child Guidance Clinic. At the new government day school, parents are required to attend training sessions to learn to help their children.

Education - There are no special classes for handicapped children in the elementary schools because of the shortage of facilities and trained teachers. The Instituto Neurológico's day school, the Centro Psico-pedagógico, started in 1961, serves children from age 3 who are severely to mildly retarded, and a few adults. Another private day school for mildly retarded children exists, and there are special education classes with a few retarded children at the school for the deaf, and at the residential facilities noted below. In 1975, the government opened its first day school for the retarded, the Centro de Rehabilitación de Niños Subnormales, which serves 5 to 13 year olds.

Work training and employment - The Instituto Neurológico provides sheltered work training including some agricultural training. The mentally retarded are generally not accepted in the outstanding rehabilitation centers which serve the physically handicapped.

Medical care - is provided by private physicians who refer the more obviously retarded to Roosevelt or other hospitals, or to the Instituto Neurológico which can offer, to a limited number, complete medical care in all specialities except surgical intervention.

Residential care - A limited number of retarded children and adults are cared for in the century-old Recuperación Centro No. 1, an institution for chronically disabled, and in the Neuropsychiatric Hospital, while some mildly retarded are in the large institution for dependent children, Centro Educativo Asistencial.

Financial assistance - Fees in the private schools are based on the family's ability to pay; a few children receive scholarships. The Instituto Neurológico is supported by private donations, fees and public fund raising, and receives a small amount of the national lottery receipts.

Recreation - Excursions are a part of the day school programs providing social learning experiences as well as recreation.

Research - The Instituto Neurológico has done some educational research and, together with the Department of Pediatric Neurology at Roosevelt Hospital, research in the treatment of convulsive disorders, use of new drugs and congenital toxoplasmosis. The research in the influence of nutrition on mental and physical development carried on by INCAP, with support from WHO, is internationally known.

Personnel training - Teachers have 5 years of training after 6 years of elementary school; some short term specialization courses and in-service training have been provided. Visiting consultants have been available through U.N. Technical Assistance in 1965 and 1970; a Partners of the Americas "PREP" exchange exists with the state of Alabama and has centered in the new government day school.

OTHER INFORMATION FOR VISITORS

Information and assistance in arranging visits can be given by the Instituto Neurológico de Guatemala, or the Special Education Department in the Ministry of Education. At least one weeks's notice is requested.

School holidays:

3 weeks at Christmas, from December 15 to January 7
Easter week
Plus 6 national and church holidays:
May 1 (Labor Day)
June 30 (national holiday)
August 15 (religious-national holiday)
September 15 (Independence Day)
October 20 (Revolution 1944-national holiday)
November 1 (All Saints' Day-national holiday)

HONDURAS

Area - 42,300 sq. miles; population - over 3 million. Honduras, one of the largest Central American Republics, was established as an independent country in 1838. In recent years the government has alternated between constitutional and military regimes. The population, of mixed Indian and Spanish descent, lives largely in rural areas (79%). The capital city, Tegucigalpa, has 350,000 inhabitants; San Pedro Sula, the next largest city, is located in the commercial area of the north coast with a population over 100,000. The country is mountainous, very fertile, with rich forests. The economy rests mainly on export of bananas, coffee, timber, cotton and tobacco. Industrialization is proceeding, though not at a rapid pace. A peasant movement to spur land reform gained force in the 1970's.

Social welfare and health services and insurance programs are in a beginning stage; with increased national income more funds must be allocated to them. The law makes elementary education comulsory and free, but there is shortage of school buildings and teachers; the literacy rate is about 50%.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

There is no specific general legislation on mental retardation and only one specialized facility for the mentally retarded, officially part of the public education system, under the direction and financial support of the Department of Primary Education:

Escuela de Enseñanza Especial Bajos del Hogar Rotario Tegucigalpa, D.C.	School of Special Education

The school functions in two sections, one for deaf mutes and one for mentally retarded children. It serves about 100 children between the ages of 5-14, the majority of whom are mentally retarded. Most are day pupils, but there is a boarding section for those who come from outside the capital city. Schooling is free but there is a charge for board. Children seeking admission are examined at the school from the intellectual, social and medical point of view. The school's program is limited by a very low budget.

Emphasis is given to character training and social education, and to the extent possible, domestic and industrial arts in addition to elementary 3 R's. Usually pupils are no longer supervised by the school once they have left it.

Recently three new centers have been opened under private auspices.

To a limited degree, some services for the severely retarded are provided by the psychiatric annex of a general hospital. The Patronato Nacional de Rehabilitación dos Inválidos (National Board for Rehabilitation of the Disabled), an official agency formed in 1960, is unable financially to provide services to mentally retarded persons, being primarily concerned with physically handicapped, in particular, polio victims.

Information for visitors - may be obtained from Prof. Jaime Gómez, Director del Centro de Investigación y Educación Especial (Junta Nacional de Bienestar Social, Tegucigalpa, D.C.) *School holidays* are from Nov. 15 - Feb. 1.

HONG KONG

(UK)

Area: 404 square miles, of which only 22% is habitable. Government: British Crown Colony. From an estimated 2.5 million in 1956, the population rose to 4.4 million by end of 1975 (43% under 20 years of age), imposing a severe burden on social services. About 98% could be described as Chinese on the basis of language and origin. English is the official language. Under the general direction of the Colonial Secretary, the administrative functions of government are discharged by some 40 departments, all the officers of which are members of the Civil Service.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Medical and Health Department

Dr. Lo Wai Hoi
Mental Health Service
Hong Kong Psychiatric Center
9B Bonham Road
Hong Kong

Education Department

Miss J.E. Rowe, Principal Education Officer (Special Education)
3/F., Lee Gardens
Hysan Avenue
Hong Kong

Social Welfare Department

Mr. Tai-pin Khoo, Senior Principal Social Welfare Officer (Rehabilitation)
Lee Gardens, 4th floor
Hysan Avenue
Hong Kong

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Citizen

Hong Kong Association for Mentally Handicapped Children & Young Persons, Ltd.
705 Duke of Windsor Social Service Building
15 Hennessy Road
Hong Kong

Founded 1965. Affiliated with: H.K. Council of Social Service, International League of Societies for the Mentally Handicapped

Action Group for Aid to the Mentally Retarded
c/o above address

Other voluntary organizations which include mental retardation

Caritas (Hong Kong)
Christ Church
Heep Hong Club

Home of Loving Faithfulness
Hong Kong Christian Service
Hong Kong Spastic Association
Junk Bay Medical Relief Council
Lutheran Church, Missouri Synod
New Life Psychiatric Rehabilitation Association
Po Leung Kuk
Sam Shui Natives Association
St. James' Sheltered Workshop
The Salvation Army
Society for Protection of Children

Most of the above organizations are members of the Joint Council for the Physically and Mentally Disabled (c/o Hong Kong Council of Social Service, 15 Hennessy Road, Hong Kong).

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Clinical assessment - No locally standardized intelligence test has yet been devised for Hong Kong children and the applicability of Western constructed and standardized tests for use with Chinese children has often been questioned. However, some tests have been translated and adapted for local use. Work on establishing local norms for some group ability tests has already started. Evaluations are also done by clinical psychologists, staff members of the Social Welfare Department and of the Special Education Section of the Education Department. Young Memorial Center, Caritas and Hong Kong Christian Service undertake, on request, testing for suspected mental retardation.

Education - The Education Department is responsible for all educational facilities for mentally retarded children. Its policy is to encourage voluntary organizations to expand special school facilities for children in need of special education by giving financial assistance to schools which have reached the required standard. The Special Education Section of the Education Department advises and supervises all special schools and classes, and also operates classes for slow learning children in government and government aided primary schools. The first special school was started by a parents' association in 1964; now there are five. Another 14 centers serving 990 moderately retarded children are supported by the Social Welfare Department.

Work training and employment - Since 1959 the Social Welfare Department has undertaken placement of the handicapped in open industry, including the mentally retarded.

Medical care - Psychiatric advice and medical care for children in residential care are provided by the Medical and Health Departments. Maternal and child health services are of significance in prevention.

Residential care - There are 12 residential facilities of which 8 are subsidized by the Social Welfare Department. The Medical and Health Department also provides care for 200 severely and profoundly retarded children and adults. The Department also subsidizes 24 residential places for severely retarded children.

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There is no special legislation referring to the mentally retarded as such; under the 1960 Mental Health Ordinance they are included under the term "mentally disordered" for voluntary or temporary admission or treatment in the psychiatric hospital.

Financial assistance - Since 1973 disability and infirmity allowances are payable in Hong Kong to both the physically and mentally handicapped who need constant care. Chinese traditional, regional and religious organizations and other voluntary welfare organizations which abound in Hong Kong provide considerable financial and material aid, counseling and various services to the sick and the handicapped.

Research - The Research Testing and Guidance Section of the Education Department is preparing standardized attainment and aptitude tests for Chinese children in Hong Kong. The Special Education Section is experimenting with remedial teaching methods for retarded children.

Personnel training - The two universities in Hong Kong regularly organize courses of training for workers in this field. The Special Education Section of the Education Department runs one year in-service courses for teachers of handicapped children; all those who teach such courses have received specialized training overseas.

Planning - The Social Welfare Department, in conjunction with the Hong Kong Council of Social Service, has a 5-year plan for the development of voluntary and governmental services in the social welfare field for the care, training and employment of the mentally retarded. Close liaison is maintained with the Medical and Health, Education and Labor Departments in this field. The Joint Council for the Physically and Mentally Disabled, a division of the Hong Kong Council of Social Service, helps to promote the coordination of services, particularly among voluntary agencies. The Special Education Section of the Education Department also has a Second 5-Year Development Program to expand educational facilities and special services required by slow learning and mildly mentally retarded children.

OTHER INFORMATION FOR VISITORS

The Social Welfare, Education, and Medical and Health Departments will gladly arrange a program for a professional visitor or group of visitors; at least a fortnight's notice beforehand is desirable.

School holidays - Summer vacation - middle of July through August; Christmas vacation of 2 weeks; Chinese New Year Holiday - 9 days (usually in early February); Easter and Ching Ming holiday - 2 weeks; in addition, there are 7 special 1-day holidays during the year.

HUNGARY

The Hungarian People's Republic has a population of 10.5 million and occupies a territory of 36,000 square miles, bordering Austria on the West, Yugoslavia in the South, Rumania in the East, Czechoslovakia in the North and - for a brief distance - the USSR in the Northeast. It has a fairly moderate climate and most of the land is a flat plain. The native language is Magyar, related to Finnish. About 2/3 of the population are Catholic, most of the remainder Protestant.

Hungary's system of government looks to the National Assembly as the highest state authority. The Assembly in turn elects from its membership the Presidential Council of 20 members and one secretary, who constitute the collective head of State. The Council of Ministers, consisting of a Prime Minister, 5 Deputy Prime Ministers, one Minister of State and 21 members, exercises the actual executive-administrative functions of government.

While Hungary continues to depend heavily on agriculture for export, its rate of industrialization has increased rapidly and added to its economic strength and trade position. There is an extensive social insurance system for employed persons and their families, much of it financed by the government, under the Ministry of Health and the Social Insurance Chief Administration of the Central Trade Union Council; medical benefits and family subsidies are included.

Public education is free and compulsory for 6 to 16 year olds; there are 91 institutions of higher education. Special education had its beginnings in Hungary in 1802 with a special school for the deaf and dumb. Before 1945 there were special school places for only about 2,000 pupils; over one and one half percent of the school age population is now receiving special education and special schools have been set up wherever three or more classes are needed. Otherwise, the special classes are part of the regular school.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSILITY

Ministries

Müvelődésügyi Minisztérium	Ministry of Education
Közoktatásügyi Főosztály	Department of Public Education
Alsófoku Oktatási Osztály	Elementary Education Section
Szalay utca 10-14, Budapest V	
Egészségügyi Minisztérium	Ministry of Health
Szociálpolitikai Főosztály	Department of Social Policy
Anya- és Gyermekvédelmi Főosztály Akadémia utca 10, Budapest V	Department of Mother and Child Care

Other official agencies

Fővárosi Anyavédelmi Központ	Municipal Center of Mother Care

Teratogenetikai Ambulancia Bakáts tér 10, Budapest IX	Out-Patient Department of Teratogenetics
Országos Közegészségügyi Intézet Genetikai Munkacsoport Gyáli ut 4, Budapest IX	State Public Health Institute Department of Genetics

Provincial agencies

Megyei Tanács Müvelődésügyi Osztály és Egészségügyi Osztály	County Council Department of Education and Department of Health

Provincial agencies are in each of the 19 counties.

National planning and coordination - This is the responsibility of the above ministries.

VOLUNTARY ORGANIZATIONS

There are no voluntary or professional organizations concerned only with problems of the mentally retarded. Parents are encouraged to participate in the Parents and Teachers Associations of the various schools which coordinate school education with home education.

The following organizations included concern for mental retardation:

Magyar Pszichológiai Tudományos Társaság Meredek utca 1, Budapest XII	Hungarian Scientific Association of Psychology
Gyógypedagiógiai Pszichológiai Szekció	Section for Psychology of the Handicapped
Orvosi/Klinikus/Szekció	Section for Clinical Psychology
Magyar Pedagógiai Társaság Gyógypedagógiai Szakcsoport Gorkij fasor 10, Budapest VI	Hungarian Association of Pedagogy Section on Special Education
Magyar Rehabilitációs Társaság Frankel Leó utca 38-40, Budapest II	Hungarian Association of Rehabilitation
Magyar Vöröskereszt Arany János utca 31, Budapest V	Hungarian Red Cross

RESEARCH

Hungarian Academy of Sciences
Psychology Committee
Münnich Ferenc utca 7
Budapest V

Division of Medicine
Roosevelt tér 9, Budapest V

Training College for Teachers of Handicapped Children
Psychological Institute
Bethlen tér 2, Budapest VII

Central Statistical Office
Demographic Research Institute
Csaba Ratey

Studies are also carried on by the Ministries of Health and of Education and other official agencies listed above.

PUBLICATIONS

Gyógypedagógia	Special Education
Gyermekgyógyászat	Pediatrics
Magyar Pszichológiai Szemle	Hungarian Review of Psychology
Ideggyógyászati Szemle	Review of Neurology and Psychiatry
Orvosi Hetilap	Medical Weekly
Népegészségügy	Journal of Public Health
Szocialis Gondoskodás	Social Care

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents - There exists the possibility of casefinding at the network of child guidance clinics in most of the 19 counties. The Training College for Teachers of Handicapped Children maintains a central advisory out-patient clinic specifically responsible for diagnosis and care of handicapped children.

Education - Special education in Hungary is identified with "Heilpaedagogie" (curative education) and is an organic part of public education under the Ministry of Education. This compulsory education extends to handicapped children under separate programs for the mentally, physically, sight, hearing or speech handicapped, from 6 to 16 years of age. Below and above that age the handicapped are the responsibility of the Ministry of Health. The Act for Compulsory Education guarantees the right to learn. Classes for retarded children are organized on the "educable" and "trainable" levels. In 1969, 26,000 retarded children were receiving education in 41 boarding schools, 66 auxiliary schools and 288 special classes adjoined to normal primary schools. There is much stress on pre-vocational training, particularly in the classes on the trainable level.

Work training, employment - Retarded persons over 16 years of age receive basic vocational training and employment in the Rehabilitation Center of the Ministry of Health (Majusegy ut 21, Budapest XIV). One of the Center's responsibilities is to organize other work training centers and sheltered workshops.

Medical care - All citizens of Hungary get medical care free of charge through facilities run by the Ministry of Health.

Residential care - Severely retarded persons (IQ under 30) are cared for in State Centers, while moderately and mildly retarded children may go to boarding schools, if no special class is available at their place of residence. Children are admitted to institutions or boarding schools only after several detailed examinations by a specialized team.

Financial assistance - Higher family allowances are paid to families with mentally retarded children. The handicapped person is also entitled to a special allowance.

Research - Research is carried out in many university departments and hospitals, as well as the Training College for Teachers of Handicapped Children, founded in 1900. In 1971-1972, the Training College, the State Institute of Public Health, and the Demographic Research Institute of the Central Statistical Office, made a study of retarded children in Budapest.* It included an epidemiological survey of the total number of children (4,806) who were in special programs for the mentally deficient in Budapest (3.74% of all school age children in Budapest); as well as a genetic, sociological and psychological profile of a sub-group of 1,870 children in the first 4 classes in special schools in Budapest.

Personnel training - Teachers of handicapped children have a 4-year college level training program at the Training College in Budapest, or have to follow a 5-year correspondence course.

OTHER INFORMATION FOR VISITORS

Visitors from abroad wishing assistance in planning visits to facilities should write either to the Ministry of Education or the Ministry of Health.

School holiday periods - The official school year begins on September 1 and lasts until June 10, with 2 weeks holiday for Christmas and another week holiday for Easter.

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*Agnes Lányi-Engelmayer, "Budapest Study on Mental Retardation (Psychological Aspects)," in Proceedings of the Third Congress of the International Association for the Scientific Study of Mental Deficiency Volume I, D. A. A. Primrose, Ed. (Polish Medical Publishers, 1975) pp. 276-280.

ICELAND

The Republic of Iceland is an island of volcanic origin, located in the Atlantic Ocean close to the Arctic Circle. Thanks to the warming effect of the Gulf Stream, Iceland has a very moderate climate in summer and winter. With a population of 220,000 it occupies 40,000 sq. miles. Iceland was an independent republic from 930 to 1262, then was united with Norway until 1380 when both countries came under Danish rule. Although Denmark acknowledged Iceland's independence in 1918, it was not until 1944 that the country severed all governmental ties with Denmark. Reykjavík is the capital.

The Head of State is the President, elected for a 4-year term, but the actual executive power is vested in the Prime Minister and his Cabinet. Althing, the oldest parliamentary assembly in the world, celebrated its 1,000th anniversary in 1930.

The fishing industry is Iceland's principal national resource and export. Sixteen percent of the population is involved in agriculture. Industry has been greatly expanding in recent years and there is great potential for hydroelectric development. Houses and offices are heated by water from the volcanic springs piped into the towns.

The educational system provides for 8 years of compulsory schooling and there is virtually no illiteracy. Iceland has 4 colleges and a state university. The State church is Evangelical Lutheran and more than 90% of the population belong to it. The Icelandic language is closely related to Old Norse and, in contrast to the other Nordic languages, has undergone little change through the centuries.

The first specialized facility for the mentally retarded was a private home for children opened in 1930. A law was adopted 6 years later authorizing the state to provide training, treatment and care, including a residential institution for profoundly retarded persons, residential work centers for adults, and school homes for the mildly retarded. In 1967, a new law named the residential home at Kópavogi as the central institution to be responsible for public residential and day programs. According to records carried out on behalf of the Icelandic Department of Health in 1974, 0.61% of the population is mentally retarded.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Heilbrigdismálaráduneytid Laugavegi 172 Reykjavík	Department of Health
Menntamálaráduneytid Hverfisgötu 6 Reykjavík	Department of Education
Félagsmálaráduneytid Arnarhvóli Reykjavík	Department of Social Affairs

Planning and coordination

Fávitahaelid í Kópavogi Kópavogi	State Residential Home for the Mentally Retarded
Björn Getsson, forstödumadur	Superintendent
Ragnhildur Ingibergsdóttir, yfirlaeknir	Chief Physician

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Citizen

Throskahjalp Laugavegi 11 Reykjavík	National Association in Aid of the Mentally Retarded

The first Association in Aid of the Mentally Retarded, Styrktarfélag vangefinna (Laugavegi 11, Reykjavík) was founded almost 20 years ago and became a member of the International League of Societies for the Mentally Handicapped in 1972. Over the years it has assisted in the formation of local independent associations in different parts of Iceland and has, in fact, functioned as a national organization. In 1976, Styrktarfélag vangefinna, together with the four other Associations of parents, teachers and other workers, established Throskahjalp which will take over the responsibility of a national organization.

Others which include mental retardation

Öryrkjabandalag Íslands Hatún 10 Reykjavík	Icelandic Association of Societies for Handicapped People

This organization is a federation of societies for persons with various handicaps and is a member of Rehabilitation International.

Lions International and the Oddfellows in Iceland have contributed considerably to the voluntary work in this country.

RESEARCH

Fávitahaelid í Kópavogi Rannsóknarstofa Kópavogi	Home for the Mentally Retarded Research Laboratory
Rannsóknarstofa Erfdafraedinefndar Rannsóknarstofu Háskólans v/Barónsstíg Reykjavík	Research Laboratory in Genetics

PUBLICATIONS

Tímarit Styrktarfélags vangefinna Laugavegi 11, Reykjavík	A periodical published by the Reykjavík Association .

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Services are available at the Child Guidance Clinic and Well-Baby Clinic in Reykjavík; for the most part, however, these are in the hands of the practicing physicians and the staff of the various hospitals throughout the country. They have access to the services of specialists in neurology, pediatrics, psychiatry, etc., and the various other disciplines such as psychology, speech and hearing. Iceland has socialized medicine. Most of the residential institutions and day centers have the services of specialized workers, but there is still a shortage of these as well as teachers and trained staff.

Education - All mentally retarded children are entitled to education from the ages of 4 through 19. The teaching is paid for by the State. In 1974 a new law was passed dealing with a comprehensive school system in Iceland, including paragraphs on teaching and training in residential institutions, classes for the "educable" retarded, a school for multi-handicapped children and classes for slow learners in ordinary schools. This program is still in a preparatory stage. One school for "educable" retarded children is Oskjuhlídarskóli in Reykjavík. A few of the regular schools already have special classes for slow learners. Recently, a training center for multi-handicapped children was established in Reykjavík.

Day centers provide education and training for the moderately and severely retarded children. These are operated either by the government or by voluntary organizations. The Society for the Aid of the Mentally Retarded in Reykjavík operates two centers: Lyngás, a day center for 46 children under 15 years old, and Bjarkarás, a training center for 44 youths and adults which, since 1976, has also had a home ("pensionat") for 5 to 7 people. In 1974, the Association in South Iceland opened a small day center in Selfossi. In the same year the government established a school for multihandicapped children, Fjölfötlunarskólinn, in Seltjarnarnesi.

Residential care - Institutions are either government or independently run, but are all under the supervision of the Central Institution, Kópavogshaeli in Kópavogi, responsible to the Department of Health. The Central Institution was started in 1952 and has 200 residents, from 2 to 72 years of age, living in 19 housing units of 10 to 12 persons per group. There is overcrowding since emergency cases and the most difficult individuals are accepted there. Tjaldanes, in Mosfellssveit is a public institution for 25 residents. There are two independent institutions in the south, Sólheimar in Grímsnes (opened in 1930) with 42 residents; Skálatún in Mosfellssveit, with 54 residents. Sólburg, in the north, has 50 residents and 10 day care clients, and also runs a small boarding home.

Work training and employment - Work training to some extent is given at all residential institutions. Styrktarfélag vangefinna has operated a training center in Reykjavík for people over 15 years of age since 1971. An employment agency for all handicapped people has been operating in Reykjavík since 1961, until recently through the Association of Societies for Handicapped People, but now as a separate agency receiving government support. The Association operates a sheltered electronics workshop.

Financial assistance - The National Insurance Service covers the day to day maintenance of residents in all institutions as well as the day center charge, which amounts to 3/5 of the cost per day in the State institution. Child disability benefits are paid through 1 to 16 years of age. Mentally handicapped persons over 16 years, who are living at home or staying in day centers, receive full disablement pensions plus guaranteed minimum wages. Residents over 16 years of age receive pocket money amounting to 10% of the full disablement pension. Transport to and from day centers is free of charge. A fund for the aid of the mentally retarded was set up in 1958 by law from the Parliament, taxing all beer and soft drinks manufactured in the country. This fund has met by far the greatest part of the cost of expansions of all Icelandic institutions -- state or privately owned. Private contributions are increasing every year.

Research - The Genetics Research Laboratory is doing some research in Downs Syndrome and other chromosome abnormalities. Amino acid screening on a limited scale is done at the state institution in Kópavogi.

Personnel training - The Teachers' Training College has operated a department for remedial teachers since 1971. The state institution in Kópavogi has a 2-1/2 year program during which students are trained to work with mentally retarded people (such workers are called "developmental therapists").

Planning - Planning with regard to prevention consists mainly of improving prenatal care, obstetrical care, infant care and general counseling.

An institution for the mentally retarded is in project at Egilsstadir in the east of Iceland. In recent years there has been an increasing trend towards integration and normalizing of living conditions for the mentally retarded. The Society for the Aid of the Mentally Retarded in Reykjavík plans to establish in the near future a recreation home, as well as more small boarding homes for those who can work either at a training center or in the open market.

OTHER INFORMATION FOR VISITORS

Information may be obtained from the Department of Health and the Department of Social Affairs.

School holiday periods - are from the 30th of May until the 1st of September.

INDIA

India, an independent republic since 1950, occupies 1,262,000 sq. miles and has a population of over 600 million. The constitution provides for a President, a bicameral Parliament, and a Council of Ministers headed by the Prime Minister, who is effectively the Head of State. India is a union of 22 states and 9 territories. The central government has considerable power and there is only limited autonomy for local government.

Eighty percent of the people live in rural areas and agriculture is the main occupation, producing both foodstuffs and cotton, rubber and lumber. Next in importance are textile industries and industrial plants producing steel, chemicals and machinery.

There are 14 main languages of which Hindi is spoken by almost half the population. It is now the official language, with English being the associate language. 85% of the people follow the Hindu religion. Literacy is estimated at about 30%. The capital city, New Delhi, has a metropolitan area population of nearly 4.5 million, while Calcutta has over 7 million inhabitants.

India is a land of great contrasts, with extreme deprivation in many rural districts and urban areas, and a relatively high level of industrialization and standard of living in cities like Bombay, New Delhi and Madras. Despite the many serious problems facing India at this point in her long history, mental retardation and other disabilities are receiving attention in both governmental and voluntary sectors.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Department of Social Welfare
Government of India
Shastri Bhavan
New Delhi

This Department is responsible for education, training and rehabilitation of the mentally retarded.

Ministry of Health
Nirman Bhavan
New Delhi

This Department is responsible for diagnosis, treatment and guidance. In each State the Ministries of Health and Social Welfare are concerned with treatment and rehabilitation of mentally retarded persons. There are various hospitals and clinics working under Ministries of Health where diagnostic and treatment services are provided. Directorates of Social Welfare under the Ministry of Education or Social Welfare look after institutions where care and training are provided for the mentally retarded.

Planning and coordination - The National Advisory Council for the Handicapped, consisting of representatives from the various State governments and voluntary organizations and experts appointed by the Department of Social Welfare, prepares plans for rehabilitation of the mentally retarded at the national level. The National Planning Commission consults with the Department of Social Welfare while preparing the plan for the country as a whole.

VOLUNTARY ORGANIZATIONS

Primary concern in mental retardation

Federation for the Welfare of the Mentally
Retarded (India) FWMR
No. 3, Red Cross Road
New Delhi - 110001

The FWMR is a national voluntary organization, established in 1966, with membership consisting of individuals, associations and institutions/special schools; a majority of the latter are run by voluntary organizations of parents, teachers and social workers, with many receiving government grants from their state and a few from the central government.

The Federation coordinates services for the mentally retarded in the country and tries to encourage formation of an effective network of facilities. It initiates the setting up of Special Schools and Rehabilitation and Vocational Training Centers. It has to date organized six conferences on an all-India basis and is hosting the 1977 Third Conference of the Asian Federation for the Mentally Retarded in Bangalore.

A newly formed Technical Cell has also been set up by the FWMR. The members of the Cell are all specialists in various aspects of mental retardation and live in different parts of the country; they undertake to evaluate cases and counsel parents from their particular areas. The Technical Cell is working on a standardized curriculum for use in special schools throughout the country, as well as on initiating research and survey programs.

Other national voluntary organizations

All India Association on Mental Retardation
Department of Psychology, Delhi University
Delhi

Nimbkar Rehabilitation Trust
"The Amarind"
15th Road, Khar
Bombay - 400 052

RESEARCH

Department of Social Welfare
Government of India, New Delhi

Department of Health
Government of India, New Delhi

Indian Council for Medical Research (ICMR)
New Delhi 16

B.M. Institute of Mental Health
Ashram Rd.,Nr.Nehru Bridge, Ahmedabad-380009

15~

National Institute of Mental Health and Neuro
Sciences (NIMH&NS)
Bangalore 27

All India Institute of Medical Sciences (AIIMS)
New Delhi 16

Post Graduate Institute (PGI)
Chandigarh 11

In addition, the Health Ministries and Social Welfare Ministries at State level also initiate research projects.

PUBLICATIONS

Indian Journal of Clinical Psychology	Published half-yearly by the Indian Ass'n of Clinical Psychologists
Indian Journal of Psychiatry	Official organ of the Indian Psychiatric Society, published quarterly
Mental Retardation Digest	Published 3 times a year by FWMR
FWMR Newsletter	Monthly by FWMR
Indian Journal of Mental Retardation	Published 2 times a year by the All India Ass'n on Mental Retardation
Journal of Rehabilitation in Asia	Published by the Nimbkar Rehabilitation Trust
The Retarded	Published by Alakendu Bodh Niketan, Calcutta; quarterly

Directories - The B.M. Institute has published directories of clinical and other services for the mentally retarded beginning in 1969. The institutional directory has been brought up to date by FWMR, and in 1975 a Survey of Institutions for the Handicapped in India, by state, including the mentally retarded, was published by the Nimbkar Rehabilitation Trust.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents- Usually the parents go to various general hospitals for consultation and, if advised by the medical practitioner, the children are examined by the specialists in departments of pediatrics, psychology, psychiatry, neurology, etc. These services are available mostly in cities; people who live in small towns and villages have to come to these places for specialized services.

Education - There are about 121 facilities (day and residential) for the mentally retarded in India, of which 62 are affiliated with the FWMR.

Most provide some education and training, particularly in various kinds of handicrafts. A limited number of special classes for the mildly retarded were recently established in two regular schools in Bombay. Some schools have a program of integrated classes. There are many projects under way which include setting up of special schools with workshops and rehabilitation and vocational centers.

Work training and employment - Most schools have handicraft training which includes loom weaving, carpentry, preparation of spices for cooking, a little tailoring, binding, etc. Recently such crafts have found a market though a limited one. There are few specialized sheltered workshops for the mentally retarded as such, but a number of workshops for the disabled are now including some mentally retarded persons as well.

There are no special employment exchanges to help the mentally retarded obtain jobs. The Special Employment Exchanges for the Handicapped do not include the mentally retarded in their program. Some thought is being given to this problem.

Residential care - While mentally retarded persons have been accepted in some nursing homes and homes for destitute persons, India's extended family system has meant they were cared for generally at home. The first residential home for retarded children opened in 1941 as a special unit of a home managed by the Children's Aid Society of Bombay. This was followed in 1944 by the establishment of a School for Children in Need of Special Care, under private auspices, also in Bombay. The large increase in facilities has mainly taken place since the mid-1950's. About half of the existing programs are residential, although many also accept some day pupils.

Medical care - Most of the institutions have a medical officer and some have diagnostic clinics attached. Treatment is also given in various private and public hospitals.

Financial aid - There are two institutions for the mentally retarded which are completely under the Central government (New Delhi). Institutions wholly run by State governments have increased, while quite a few are partly aided by State governments. The rest are managed by voluntary organizations and a few are run by service oriented welfare clubs. Voluntary organizations receive financial assistance from donations, both from the public and private philanthropists, as well as grants-in-aid from the Central government and State governments. Funds are also raised from member subscriptions.

Research - Medical-biological research is being carried on in some of the major medical centers and hospitals; and studies in the educational and social areas are being conducted in a number of institutions, including schools of social work. It is felt, however, that major emphasis must be put on provision of services, considering the limitation of funds.

Personnel training - In about 4 teacher-training colleges, diploma courses are given for teachers of the mentally retarded. In-service training courses for teachers are provided in various centers - for example, at the Model School Kasturba Niketan, in New Delhi (Central government, Department of Social Welfare), and the(private) B.M. Institute, Ahmedabad. In cooperation with the university, the FWMR initiated a teacher training program as a 1-year degree course at the National Institute of Mental Health and Neuro-Sciences at Bangalore, and has set up a refresher course for teachers of the retarded also.

OTHER INFORMATION FOR VISITORS

Requests may be directed to the Federation for the Welfare of the Mentally Retarded (FWMR), 3-Red Cross Road, New Delhi.

School holidays - Most schools in the north are closed from mid-May to mid-July; those in the south are closed from mid-April to the end of June, and again in December; number of days depends on individual institutions.

INDONESIA

Area - 581,655 sq. miles; population 130 million. Indonesia, with about 13,000 islands, is the world's largest archipelago. The population density is 1,500 per sq. mile in Java, one of the most densely populated areas in the world. A great variety of races and religions are represented; 90% of the people are Moslem, 10% Budhists, Hindus and Christians. The capital city is Jakarta;the official language is Bahasa Indonesia (from Malay).

Indonesia, until 1942 a Dutch overseas territory for about 300 years, proclaimed its independence in 1945. In 1968 General Suharto was appointed President by the People's Consultative Assembly, the highest organ of the State which determines the broad outlines of state policy. The President holds wide executive powers under the constitution.

Indonesia is still overwhelmingly an agricultural country (rice, coffee, rubber, spices) but it is rich in oil, coal and minerals.

Social welfare services have developed slowly. Social insurance is limited to a very restricted health insurance for certain groups of employees and a similarly restricted work injury compensation scheme. There is compulsory primary education for children 6 to 12 in age, and the literacy rate is 60%. The total estimate of mentally retarded children is about 2% or 2.6 million children. From the geographical point of view, the care for the mentally retarded would develop well if financial support was available.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Departemen Pendidikan dan Kebudayaan Jakarta -	Department of Education and Culture
Bagian untuk Pendidikan Luar Biasa	Section for Special Education
Bagian Pendidikan Guru untuk Anak^2 Cacat	Section for Training of Special Teachers
Badan Koordinasi Sekolah^2 Swasta untuk Anak^2 Cacat	Coordination of Private Schools for Handicapped Children
Departemen Sosial Jakarta	Department of Social Affairs
Direktorat Rehabilitasi	Directorate for Rehabilitation
Departemen Kesehatan Jakarta	Department of Health

VOLUNTARY ORGANIZATIONS

Concerned primarily with mental retardation

Federasi Nasional untuk Kesejahteraan Penderita Cacat/Terbelakang Mental 32, Jl. Jend. A. Yani Magelang	National Federation for the Welfare of the Mentally Handicapped

The National Federation, established in 1967, includes both governmental agencies and voluntary societies as members. The Federation promotes coordination and cooperation among its members, as well as between the Federation and all agencies working for the welfare of the mentally retarded. The Federation has been a member since 1972 of the International League of Societies for the Mentally Handicapped.

Voluntary organizations which include concern for the mentally retarded

Badan Kerja Sama Panti Asuhan c/o Mrs. Nasution, Chairman Jalan Prof. Moh Yamin 5, Jakarta	Coordinating body of voluntary agencies concerned with orphanages
Yayasan Pemeliharaan Anak Tjatjat c/o Mrs. D. Soeharso, Secretary Jalan Overste Slamet Riyadi Surakarta	Indonesian Society for the Care of Crippled Children

RESEARCH

Badan Penelitian dan Peninjauan Social Jogjakarta	Research Body for Social Welfare
Proyek Percontohan Rehabilitasi Penderita Cacat Mental Jalan Kartini 1, Temanggung Central Java	Pilot Project for Rehabilitation of the Retarded

PUBLICATIONS

New Horizons - a quarterly review of rehabilitation, issued since 1964 by the Rehabilitation Center in Surakarta, frequently includes information on mental retardation.

Berita Sumber Asih, published by Jajasan Sumber Asih.

The National Federation for the Welfare of the Mentally Handicapped regularly issues brochures on mental retardation and on the Federation's activities.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Children are assessed and referred to available services by general practitioners and pediatricians. Before acceptance at the schools of Sumber Asih and Asih Budi, each child is tested at the Department of Psychology of the University of Indonesia, and continuing evaluation is carried on by a team of consultants. Consultation to parents is considered an important function of the various groups providing services.

Education - Before 1960 two day schools were opened under voluntary auspices in Jakarta: Sumber Asih (Jalan Patimura 5) for moderately and severely retarded children, and Asih Budi (Jl. Mendut 13) for mildly retarded children. In the following years an increasing number of schools have been established under public and private management in different parts of the islands. Much attention is paid to social training and class size is kept small, with 8 to 12 in a group.

Work training and employment - Prevocational training is emphasized in the schools to promote skills, and some articles are for sale. There is little experience yet in providing jobs to school leavers. The sheltered workshop Budi Karya (Jl. Cimandiri 32, Jakarta) provides employment for deaf, mute and mentally retarded persons.

Residential care - There are at least two boarding schools for mildly retarded children and six for moderately and severely retarded children. The first effort to provide special care for profoundly retarded children was made in 1968 for 25 children by the society of Panti Asih in Pakem Jogjakarta, now serving nearly 90 children. Another residential school, Rindang Kasih in Magelang, was founded in 1962 and presently serves 60 children; this is a demonstration project supported by the National Federation for the Welfare of the Mentally Handicapped.

Financial assistance - The Department of Social Affairs provides a per capita subsidy of 200 rupees a day for public schools and residential homes, and 60 rupees for private ones. Most must depend heavily on additional private donations and tuition and fees from parents.

Personnel training - Training for special education teachers is provided at the I.K.I.P. University departments in Jogjakarta, Surabaya, Jakarta and Bandung. The Bandung special education training college, the Perintis Pendidikan Luar Biasa (Jl. Cipaganti 146), is a semi-governmental boarding and day school for children with special needs, including the moderately and severely as well as the mildly retarded. Teachers and buildings are provided by the government and maintenance is from private sources.

Assistance in training teachers has also been received from a consultant who is appointed through the help of the Dutch Werelddiakonaat and the Dutch national Protestant Parent Association "Philadelphia," who conducts a 2-year training course under the sponsorship of Sumber Asih. Courses for rehabilitation workers given by the Rehabilitation Center in Sukakarta include the subject of mental retardation.

Planning - In addition to cooperation with government agencies, the National Federation and its 54 member societies work with such other voluntary organizations as the National Council of Social Welfare, the coordinating board of voluntary agencies concerned with orphanages, the Society of Teachers of Schools for Mentally Handicapped Children, and the Council of Churches Health and Social Welfare Committee.

A 5-year plan of action which the Federation has set up for 1975-80 includes two demonstration projects in rehabilitation and in medical care and research; 7 pilot programs will carry out the findings of these two projects.

Other information for visitors - may be obtained from the National Federation for the Welfare of the Mentally Handicapped, the Section for Special Education of the Department of Education and Culture. *School holidays* are from December 1st through January 15th.

IRAN

Iran is a constitutional monarchy situated in southwest Asia on the Persian Gulf and the Caspian Sea. It occupies 636,296 sq. miles, has a population of nearly 34 million, and its capital is Tehran. A non-Arab Moslem nation, the languages spoken are Farsi (Persian), the predominate language, Kurdish, and Azerbaijani. Iran is mostly a plateau and desert land, but with seaside lowlands and northern mountains. The temperatures reach extremes and the climate is quite dry. Still a predominately agricultural country, famous for centuries for her handicrafts and carpets, industrialization began in the 1920's and land reform in the 1950's. Crude oil is the chief export.

The 14 provinces which comprise Iran are headed by the Shah, who appoints a Premier, the head of the Cabinet and responsible to the Parliament. The Shah is determined to bring his country from a "developing" to a "European" level within this decade, through social and economic reforms aided by the country's vast reservoir of oil wealth.

Education is either public or private, but it is not compulsory (except in larger cities for elementary education), although a law to accomplish this was enacted in 1943, because of financial and other problems with starting schools and training teachers for the thousands of villages. Public education can be obtained at a modest fee, and both public and private education are available in the primary, secondary, technical school and university levels.

A newly established Ministry of Health and Social Welfare oversees social welfare functions which are carried out by numerous private, secular organizations.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ministry of Education
Dr. Homa Ahy, Director - Department of Special Education
Amaniyeh Duma Building, Pahlevi Road, Tehran

Ministry of Health and Social Welfare
Old Shemiran Rd., Tehran

Ministry of Labor and Social Affairs
Old Shemiran Rd.,
Taknt-e Jamshid Ave., Tehran

Other agencies

National Organization for the Protection of Children (NOPC)
Avenue National University, Evin, Tehran

This child welfare agency was founded in 1950 and is responsible to the High Presidency of the Empress. Since 1963 it has been serving retarded children in Tehran and the provinces.

National Iranian Society for Rehabilitation of the Disabled (NISRD)

Kh. Shahreza, Kh. Sarahar #34, Tehran

The Society has overall responsibility for planning and promoting services for disabled persons. It is a member of Rehabilitation International and hosted R.I.'s special education seminar in 1976.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Assessment and diagnosis are an overall responsibility of the Special Education Department for school-age children. There are few specialized resources for early identification other than NOPC and its child guidance clinical services in Tehran and the provinces. Little has been available in counseling of parents except in the schools.

Education - Until 1969 when the Ministry of Education created a Department of Special Education, education for handicapped children was available only in a limited number of private schools. During the years since then an increasing number of special schools for children with different disabilities have been established, but the overall trend is toward integration with special classes in regular elementary schools to the extent possible. A descriptive overview of Iranian educational services for handicapped children was given in Special Education in Iran: Who Is the Exceptional Child? What Child Is Not? published in 1972 by the Ministry of Education and authored by Dr. Homa Ahy, Director General of Special Education.

Work training and employment - Vocational training is beginning to be emphasized, for example, in the Omid Koudak School of NOPC. For school leavers, social workers attempt to obtain work in the private sector. Sheltered employment is available so far only in residential institutions.

Medical care - The Child Guidance Clinic of the NOPC, located at the Evins Center (residential), with collaboration when needed from the University of Tehran, provides medical care.

Residential care - In the Salami Exceptional Village, located near Shiraz, which serves persons with various disabilities including mental retardation, some education, work training, and sheltered employment are offered NOPC operates 5 residential centers, e.g. the Evins Center in Tehran, Saraye-Koudak #1 and #2. These provide training, education, recreation, work experiences. All privately operated children's homes are supervised by the Ministries of Health and Education.

Research and personnel training - In 1976 an International Institute for Rehabilitation in Developing Countries was started in Tehran; funded by the Government of Iran, Rehabilitation International and the United Nations Development Program, it will provide training, demonstration projects, research and information for developing nations. NOPC also carries out some studies in the areas of economic, educational, legislative, and psycho-medico-social problems of the retarded. Research done in NOPC's Child Guidance Clinic is aimed toward developing new prevention and treatment methods.

The Ministry of Education which is responsible for training teachers of handicapped children, offers both a 1-year and short term specialization courses to qualified teachers with 3 years of experience in ordinary school. NOPC trains special education staff, and 3 professional schools train workers; the Farahnaz School for Practical Nurses, the Tehran School for Social Workers, and the School for Training Educateurs (child care workers), However, more trained staff are needed than are available at this time.

Planning - Planning has been assisted by consultants from UNESCO, ILO, Rehabilitation International and other international and national agencies.

Parent associations - A number of parent groups have been functioning at various times within the past 20 years, usually in connection with a specific day school program; it is likely that a more permanent association will be formed.

OTHER INFORMATION FOR VISITORS

Requests for information or assistance for visitors can be made to:

Ministry of Information and Tourism
Elizabeth II Boulevard, Tehran

National Organization for the Protection of Children (NOPC)
Avenue National University
Evin, Tehran

NOPC will arrange visits to its facilities.

School holiday periods - The legal calendar is the Islamic lunar calendar. There are approximately 25 national holidays (usually religious) falling on various dates depending on the moon's orbit. The New Year begins on or near March 21st (Western) and is marked by a celebration lasting several weeks. Most schools and offices are closed during this time. Thursday afternoon and Friday all day constitute the Iranian weekend, the new week beginning Saturday.

IRELAND
(EIRE)

Area - 27, 136 square miles; population - 2.8 million, predominantly of Celtic origin and Roman Catholic in faith. After 700 years under British rule, in 1921 the island became a self-governing dominion, with the exception of six of the nine counties of Ulster in the northeast corner, which remained part of the United Kingdom. Since 1948 Ireland has been an independent republic, governed by the President, Premier, Senate and House of Parliament (Dail Eireann).

About 55% of the population is non-urban; agriculture and food processing is a main economic activity although other industries, including tourism, are steadily increasing. For many years emigration was high and there was a declining population rate which has reversed since 1961. Today almost 50% of the population is under 25 years of age, creating a serious employment problem.

Education between the ages of 6 and 14 is free and compulsory. Secondary education is also free and available to everyone but it is not compulsory. Education at university level is also free for those who do not have the means to support themselves. Gaelic (Erse) and English are the official languages of the country. Health services are well developed and for the lower and middle income groups needed services are free or at moderate charges. The Social Welfare Act of 1952 provides an insurance program; a voluntary health insurance scheme is available for upper income groups. Rehabilitation services for the physically disabled, the blind and the deaf are well developed.

There is no special legislation dealing with the mentally retarded who are included under the provisions related to general health, education and welfare services. The definition of mental handicap, as adopted by the governmental Commission of Inquiry in 1965, includes "those who by reason of arrested or incomplete development of mind, have a marked lack of intelligence, and either temporarily or permanently, inadequate adaptation of their environment," a statement implying that with care, treatment and education many handicapped persons will be able to live socially independent lives. A three-level terminology is used - mild, moderate and severe. Until 1975 special services were based almost entirely on residential centers; since then community-based programs have been increasingly provided.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Department of Health
Custom House, Dublin

Department of Education
Marlborough Street, Dublin

Department of Social Welfare
Aras Brugha, Dublin

Department of Labour
Mespil Road, Dublin 4

The majority of direct service programs are carried out by private agencies, primarily religious orders and more recently voluntary bodies, with financial support from national and local authorities and voluntary fund-raising. Local and district health authorities provide certain direct services.

Planning and coordination- See brief descriptive notes. The 1965 Report of the Commission of Inquiry on Mental Handicap was published by the Stationery Office, Dublin.

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Citizen and professional

The National Association for the Mentally Handicapped
of Ireland (NAMHI)
5 Fitzwilliam Place
Dublin 2

The NAMHI, established in 1961, is a federation of individual members and representatives of the 112 national, district or local organizations that provide direct or indirect services to the mentally retarded. These are associations of parents and friends, religious orders, national professional associations of physicians, nurses, teachers and social workers, rehabilitation organizations, trade unions and general educational or community service oriented organizations, such as the Irish Countrywomen's Ass'n, Soroptimist and Lion's Clubs, etc. Since 1964 the NAMHI has been a member of the International League of Societies for the Mentally Handicapped. In 1966 an International Symposium on Mental Handicap was held under NAMHI auspices at University College, Dublin. In 1975 the 6th World Congress of the International League of Societies for the Mentally Handicapped was held at the Burlington Hotel, Dublin.

Other organizations with related concern

The Royal Medico - Psychological Association
St. Davnet's Hospital
Monaghan

The National Rehabilitation Board
25 Clyde Road
Dublin 4

The National Association for Mental Health
2 Herbert Ave.
Merrion Road, Dublin 4

Union of Voluntary Organizations for the Handicapped
50 Wellington Road
Dublin 4

RESEARCH

The Medical Research Council of Ireland
9 Clyde Road
Dublin 4

PUBLICATIONS

Journals which include articles on mental retardation

Caritas
Quarterly journal
Hospitaller of St. John of God
"Granada"
Stillorgan, Co. Dublin

Impact
Journal on mental handicap
Brothers of Charity
52 Terenure Road East
Dublin 6

Journal of the Irish Medical Association
10 Fitzwilliam Place
Dublin 2

Progress
Newsletter
Cork Polio and General After-Care Ass'n
"Bonnington"
Monetonette, Cork

Directory - "An Outline of the Existing Services for Treatment and Care of Mentally Handicapped and Disturbed Children and Mentally Handicapped Adults in the Republic of Ireland" (6th edition, 1974, 128 pages), published by the National Association for the Mentally Handicapped of Ireland.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents- These services are normally carried on at children's hospitals, local child welfare clinics, and at child guidance clinics where psychiatrists, psychologists consultants, pediatricians and social workers are available. In rural areas children are referred to the regional pediatric service. Parents may consult the clinics or centers, residential or day, which serve the mentally retarded and have specialist consultant staff. The NAMHI gives advice and guidance to parents through its informational program and publications.

Education - Education is entirely the responsibility, in terms of finance, of the Department of Education, but is usually administered by the voluntary bodies. There are more than 50 special schools, day and residential, ranging in size from 25 to 30 pupils, which are recognized as part of the national school system. They serve approximately 1,000 moderately retarded children (I.Q. approximately 35-50). (Classes for "slow learners" are within the ordinary primary schools; such children are not designated mentally handicapped.) Rules governing the admission of pupils to special schools are flexible and transfers from one type to another are easily arranged without any administrative formalities.

Work training and employment - Vocational and social training is emphasized during later school years. The Dublin Association of Parents and Friends maintains a training workshop in connection with its three day schools; various residential centers have developed rehabilitation and placement programs in cooperation with the National Rehabilitation Board, which provides a special employment service for handicapped youth. Sheltered employment exists primarily as part of the residential centers' program or in a few of the larger towns, e.g. a day workshop opened in Dublin by NAMHI. The Department of Labor has commenced a re-training scheme for handicapped and redundant workers - Anco Training Authority, Mespil Road, Dublin 4.

Medical care - is provided through the usual channels as well as under the aegis of the various voluntary bodies which serve the mentally retarded.

Residential care - Residential care provided by religious orders and voluntary organizations is increasing, although the numbers of adults in district mental hospitals and county homes in 1974 was still about half of those in residential care. Among the voluntary organizations providing larger residential programs are:

The Sisters of Charity of St. Vincent de Paul
St. Vincent's, Cabra, Dublin

The Hospitaller Order of St. John of God
"Granada," Stillorgan, Co. Dublin

Stewart's Hospital (since 1870)
Palmerstown, Co. Dublin

The Brothers of Charity
52 Terenure Road East
Dublin 6

The Sisters of Charity of Jesus and Mary
Delvin, Co. Westmeath

The Sisters of La Sagesse
Cregg House, Sligo

The Cork Polio and General After-Care Ass'n
"Bonnington," Montenotte, Cork

With few exceptions institutions serve either male or female residents. Two have a resident capacity population of over 350; four have between 200 and 300; the rest are smaller. Some of these facilities also accept day pupils, and many children go home on weekends and holidays.

Financial assistance - Voluntary organizations providing residential services are financed by central government capital grants for new buildings and additions, and from the weekly maintenance rate paid by the local health authority of the home district from which the case is referred. Costs for schooling, including transportation, are the responsibility of the Department of Education. Disabled Persons Maintenance Allowances are paid to handicapped adults (persons over 16 years) not in residential care. Domiciliary Allowance is paid to mentally retarded children who are maintained at home and who require constant care.

Recreation - Voluntary associations affiliated with residential and day programs assist in recreation plans in various ways, including outings and special fund raising for recreational purposes. Several holiday homes have been so provided.

Research - As services develop, the research interests of workers in the field are growing. Research of bio-statistical nature is being carried on through the National Screening Laboratory for Inborn Errors of Metabolism at Childrens' Hospital (Temple Street, Dublin 1). A study of incidence of profound mental retardation (children ages 6 through 13 years with I.Q. less than 20) was carried out by the Hospital's Commission in 1962, with the high finding of 1.24 per thousand population of the same age group. A census of the mentally retarded in residential centers was conducted by the Medico Social Research Board in 1974. Research in learning disorders and personality factors associated with mental handicap is being undertaken in several branches of the services for the mentally retarded.

Personnel training - A special teaching course of 9 months is added to the ordinary teacher training level. About half of the teachers employed have had specialized training either in Ireland or the U.K. Since 1960 a special diploma in-service course for qualification, over a period of 3 years, in nursing for the mentally handicapped has been in existence. University courses in mental retardation are available for psychologists and physicians.

Planning - From 1961 to 1965 a government Commission of Inquiry into Mental Handicap, appointed by the Minister of Health, with multi-disciplinary representation, made an exhaustive study resulting in 96 main recommendations, many of which dealt with planning, coordination and extension of services. In the private field, the NAMHI has a continuing concern for overall planning of services. It is a member of the Union of Voluntary Organizations for the Handicapped, set up to promote coordination. In 1970 a 22-member Consultative Council on Mental Handicap was appointed, representative of bodies providing services.

OTHER INFORMATION FOR VISITORS

Either the Department of Health or the Department of Education would arrange a program for an interested visitor. The Hospitaller Order of St. John of God or the Sisters of Charity of St. Vincent de Paul or the Brothers of Charity could also do this. The National Association for the Mentally Handicapped of Ireland will also help visitors.

School holidays - occur from approximately 20th of December to the 6th or 7th of January; for about a fortnight around Easter and from the middle of July to the 3rd of September.

ISRAEL

Area - 8,000 square miles; population - 3,4 million(1975); government - republic established in 1948 with unicameral parliament (Knesset). Of Israel's population, about 518,000 are non-Jews, mostly Arabs of Moslem and Christian faiths. Since 1948 more than one million Jews have immigrated to Israel, the majority of Eastern European, Near Eastern or North African origin, and the population has almost tripled. Official languages are Hebrew and Arabic.

Industrialization has followed the development of land reclamation and agricultural cooperatives, and since 1954 the overall economy has grown remarkably despite the acute problems of building a new state in the face of ongoing conflict with its neighbors, and the challenge of absorbing and integrating newcomers from widely diversified cultural backgrounds.

Education is free and compulsory from age 5 to 16 years; at least 1/6 go on to some form of secondary education or vocational training, and a large number of education and training programs are available for adults. Over 60,000 students attend 7 universities and other specialized institutions of higher learning.

Social services are provided by central and local authorities as well as by semi-public and voluntary agencies. Since 1954, under the National Insurance Law, assistance has been increasingly available in the form of old age and survivors pensions, disability benefits and maternity and family allowances. Most of the population is covered by health insurance, the majority through Kupat Holim, the health fund of the Histadrut (General Federation of Labor).

A school for retarded children was started in Tel Aviv in 1929, followed by other isolated pioneer efforts such as those of Irene Gaster who began in 1931 to care for severely retarded, often abandoned, children. With the setting up of a Special Education Division in the Ministry of Education in 1950, special school and class programs multiplied, primarily, but not only, for the mildly retarded. In 1962, the Ministry of Social Welfare established a Service for the Retarded, with responsibility to provide general direction to existing facilities and to initiate new services and facilities. This development was greatly assisted by the assignment in 1961 (the first in any country) of a mental retardation expert consultant through the U.N. Technical Assistance program.

In 1969 the Welfare (Treatment of Retarded Persons) Law was adopted, providing that the Ministry of Social Welfare be in charge of the services for retarded persons and may require appropriate services be carried out by local authorities (excepting those covered by the Compulsory Education Law); notification of retarded persons shall be made by physicians, teachers or welfare officers to the welfare authorities; multidisciplinary diagnosis boards shall be established and cases reviewed at least once every 3 years, with provision for appeal. In 1975 the government adopted an Invalidity-Insurance Law allowing a monthly pension for all disabled and incapacitated persons, including persons who are mentally retarded.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

* Ministry of Social Welfare

Department of Child and Youth Care 8, King David Street, Jerusalem	(Agaf Letipul Bejeled Velenoar) Mr. S. Malkiel, Head of Department
Service for the Retarded 8, King David Street, Jerusalem	(Hasherut Lamefager) Mr. B. Barchad, Director

Ministry of Education and Culture

Division of Special Education Shivtei Yisrael Street, Jerusalem	(Hamador Lechinuch Meyuchad) Dr. S. Zaks, Director

Ministry of Health
20, King David Street, Jerusalem

Mental Health Services	(Sherutei Bri'ut Hanefesh) Dr. A. Falik, Director
Division of Maternal and Child Health	(Hayechida Livriut Haem Vehayeled) Dr. Anat Kalir, Director

* Ministry of Labor

Vocational Training Department	(Agaf Lehachshara Veleh-ishtalmut miktzoit) Mr. Israel Goralnik, Director

Local education, health and welfare authorities provide direct services to mentally retarded persons in cooperation with the above national governmental agencies and with voluntary organizations.

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Professional

Israel Association for the Scientific Study of Mental Deficiency
c/o Prof. Bernard Cohen
Tel-Hashomer Hospital
Ramat-Gan

Member of the International Association for the Scientific Study of Mental Deficiency which plans to hold its 1979 World Congress in Israel.

Citizen

AKIM - Israel Association for Rehabilitation of the Mentally Handicapped (Ha'aguda Lekimum Mefagrim)
116, Allenby Street, Tel-Aviv — Mr. Joseph Zalmanov, President

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* In January 1978 the Ministry of Social Welfare was combined with the Ministry of Labor. Mr. I. Goralnik is responsible for mental retardation services of the Government.

AKIM celebrated its 25th anniversary in 1976; through its 38 branches the membership of parents, volunteers, and youth organization supporters provide a range of services from day care centers, kindergartens, sheltered workshops, social clubs and hostels. It was probably the first national parent association to provide professional social work counseling, still an important function of the organization. AKIM became a member of the International League of Societies for the Mentally Handicapped in 1963, and hosted its 4th Congress in 1968 at which the Declaration of General and Special Rights of the Mentally Retarded was adopted, October 24, in Jerusalem.

Other national voluntary organizations which include mental retardation

American Joint Distribution Committee in Israel (JDC)
Sderot Herzl 81, Jerusalem

Provides consultation and financial support in the area of social services.

Association for Handicapped Children (ILAN)
9 Gordon Street, Tel-Aviv

Deals with the physically disabled; maintains a day center for severely retarded children with cerebral palsy.

Youth Aliyah
P.O. Box 92, Jerusalem

Since this agency has been responsible for the assimilation program for thousands of immigrant children, its concern has extended to the socio-cultural problems of retardation.

Israel National Society for Rehabilitation of the Disabled
40, Joseph Zvi Rd., Ramat-Gan Dr. E. Chigier, National Secretary

Includes mental retardation in its conferences and annual publications; hosted the 13th World Congress of Rehabilitation International in 1976.

RESEARCH

The Research Divisions of the Ministries of Health, Education and Social Welfare have included projects on mental retardation. In addition there are the following bodies:

Research Committee of the National Rehabilitation Council
(Va'adat Hamechkar shel Mo'etset Hashikum)
Paul Baerwald School of Social Work
Hebrew University, Jerusalem

The Henrietta Szold Institute - National Institute for Research
in the Behavioral Sciences
(Machon Henrietta Szold, Hamachon Ha'artsi Lemechkar Mada'ay Hahitnahagut)
Kiryat Menachem, Jerusalem

Youth Aliyah Child Guidance Clinic and Research Unit
6 Karmon St., Beit Ha Keram, Jerusalem   Dr. Reuven Feuerstein, Director

PUBLICATIONS

Journals - no specialized professional journal on mental retardation; among the many which include articles on mental retardation are

SAAD - bimonthly for Social Welfare

MEGAMOT - the Henrietta Szold Institute, the National Institute for Behavioral Sciences

YEDIOU - quarterly publication of AKIM; a newsletter "Tidings" (in English and German) is issued occasionally for overseas friends and supporters

Directories - An annotated listing of 40 selected facilities was prepared by AKIM for the 4th Congress of the ILSMH. Additional informational materials are available from the Ministries concerned with mental retardation.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Pediatric screening examinations are made before a newborn baby is discharged from the hospital and continuous health supervision covering about 85% of all children through early childhood is carried out in the mother and child care stations. In some of these centers a special risk register is maintained. A genetic counseling clinic functions at Hadassah University Hospital and Hebrew University Laboratory of Genetics, and such counseling is increasingly available in other medical centers. A network of 12 Child Development Centers provide services of diagnosis, psychotherapy and clinical care to young exceptional children referred to them mainly by the mother and child care stations.

Every local authority maintains a local welfare bureau to deal with all the community's welfare needs, including mental retardation. The social worker of the welfare bureau makes the first investigations and submits a detailed report to the Service for the Retarded, which sends the case to one of three diagnostic centers operating in Jerusalem (Kfar Hashvedi; residential institution of the Ministry of Social Welfare in cooperation with Hadassah University Hospital), in Tel-Aviv (Tel-Hashomer Hospital), and Haifa (Municipal Clinic).

In 1956 AKIM employed its first social worker and now maintains 16 consultation centers, working in close cooperation with the authorities concerned.

The school psychological services are responsible for detection and selection of children in need of special education.

Education - The education law of 1949 established the right of all children between 5-14 years of age to receive free elementary education and placed the responsibility on the Ministry of Education and local authorities to provide such education, including the provision of training facilities for all children in this age group should they, by virtue of their handicap be unable to benefit from the normal school system.

Classes for mildly retarded pupils are provided within the regular schools or in special schools; classes for the moderately retarded are mainly in day centers run cooperatively by the local authorities, the Ministry of Education, and the Ministry of Social Welfare (which provides attendants for the afternoon hours). Teachers are also provided for supplementary education classes in the vocational rehabilitation centers. Education programs in many of the residential homes are subsidized and supervised by the Special Education Division. AKIM has initiated specialized kindergartens and most recently sponsored the first day nursery in Jerusalem to serve Arab families with retarded children.

Work training and employment - Work training is provided through the vocational rehabilitation centers - "Ma'as" - run by local authorities and/or by AKIM. The operation is business-like. Trainees are paid for the amount of work they accomplish, and those working successfully become candidates for jobs on the open market.

Medical care - is provided both to open and to residential settings by regular visits of specialists. Children living outside institutions receive medical care through the usual facilities of the health insurance scheme.

Residential care - is provided in homes which vary widely in character. Some emphasize educational programs, some remedial care, some have special facilities for certain types of children. The service at the residential home includes complete medical and dental care, psychology, social work, speech and physiotherapy programs. The homes are maintained either by the Ministry of Social Welfare, public or private agencies. A small number of emotionally disturbed or mentally ill retarded children and adults are in residential care under the auspices of the Ministry of Health. The program of the newest institution, in Domona, the Negev, is based on small units of 8, but unfortunately the total capacity is over 400.

In recent years a few group homes (hostels) have been established by private initiative. However, government so far has given only minimal financial support and encouragement to this development, and there is considerable public resistance against the establishment of group homes in residential areas.

Financial assistance - The cost of maintaining a child in a residential home is met by the parents or, if they are unable to meet the costs, by the local authority and the Ministry of Social Welfare. Attendance at vocational rehabilitation centers is supported either by the parents or by the local authority; the Ministry of Labor provides a monthly subsidy per trainee for the first 18 months, plus 3 months on outside placement. Since 1975 disability pensions have been available.

Recreation - Both for children living in institutions and those in open care, annual summer camps are arranged along with other recreational activities including handwork, arts and crafts, music, dancing, games, parties and holiday celebrations. AKIM provides special programs in this area.

Research - A large number of research programs have been carried out in genetics, endocrinology and other medical areas, notably by Professor B. Cohen at Tel-Hashomer Hospital. The studies in cognitive modifiability undertaken by Feuerstein and his co-workers have been considered internationally a major contribution to the field. Of similar significance are Chigier's studies on the use of a group technique in vocational habilitation of severely retarded persons, with application to other areas.

Personnel training - The Institute for Training of Social Education Workers (Hamidrasha Lehachsharat Ovdim Chinuchiyim Sotsialiyim) has provided a course for personnel working in homes for the retarded. The Service for the Retarded of the Ministry of Social Welfare arranges regular in-service programs and study-days for personnel in this field.

OTHER INFORMATION FOR VISITORS

Information as well as observation programs for professional visitors from abroad are arranged upon request by the Ministry of Social Welfare, Foreign Relations Division, Jerusalem.

School holidays - In addition to the usual school holiday period of July and August, the two religious holiday periods in Spring and in Autumn are not recommended for intensive study or observation visits.

ITALY

The Republic of Italy is a South European peninsula with an area of 116,000 sq. miles and a population of 55 million. The country is not rich in natural resources and much of the area is unsuitable for agriculture. While the north has had a fast developing industrialization, the peninsula south of Rome and the islands of Sicily and Sardinia lag behind in standards of living, despite substantial agricultural and industrial investment in the past 20 years. Italy's historical and cultural monuments, museums and churches, as well as resort areas, attract over 28 million tourists a year.

Since 1946 when the monarchy was abolished by popular referendum, the country has had a parliamentary government with a President, a Prime Minister who appoints his Cabinet, and a bicameral Parliament, i.e. the Chamber of Deputies and the Senate.

The Italian State, based in the past on a highly centralized politico-administrative system, is at present decentralizing many of its functions to the Regions. In addition to administrative authority, the 20 Regions have certain legislative power with regard to mental retardation. The Italian government in 1972, by Presidential decree, transferred to the Regions the administrative State functions in the fields of medical and hospital assistance, including those relating to psychiatric assistance and mental hygiene, referring to early intervention, medical assistance and rehabilitation.

The main Governmental law concerning all categories of handicapped citizens including the retarded is Law No. 118 of March 1971, which includes retarded citizens in the category of civilian disabled persons, assigning them a monthly disability pension (for persons without property), medical assistance to be paid by the Ministry of Health, and the payment of fees to private institutions for rehabilitation purposes on the basis of a special agreement with the Ministry of Health.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Ministero della Sanità
Direzione Generale dei Servizi di Medicina Sociale
Viale dell'Industria, Roma
Prof. Luigi Nuzzolillo

Ministry of Health
Department for Social Medicine

This Ministry still has some responsibilities with regard to the mentally retarded, such as the stipulation of the agreements with private institutions and payments of fees.

Ministero del Lavoro e della Previdenza Sociale
Direzione Generale del collocamento della manod'opera
Via Flavia, 6 Roma
Dr. Silvio Lauriti

Ministry of Labor and Social Welfare
(work placement responsibilities)

Ministero della Pubblica Istruzione Direzione Generale Istruzione Elementare Viale Trastevere, Roma Dr. Aurelio Sinisi	Ministry of Education Primary Education Direction
Servizio Scuola Materna Viale Trastevere, Roma Dr. Giulio Lo Savio	Kindergarten Service
Ufficio Studi e Programmazione Ufficio Speciale per il Coordinamento delle attività degli alunni handicappati Viale Trastevere, Roma Dr. Giulio Lo Savio	Office for Studies and Programming Special Office for the Coordination of Activities of Handicapped Pupils

Regional governmental agencies

Assessorati Regionali per la Sanità e l'Assistenza	Regional Health and Welfare Departments
Assessorati Regionali per l'Istruzione e l'Addestramento Professionale	Regional Education and Vocational Training Departments

Some Regions have issued special laws for the assistance to the handicapped as well as for their schooling and social integration. Many others have included the field within the limits of their respective laws concerning the general welfare activity. The maternal and children's services formerly carried out by OMNI (Opera Nazionale Maternità e Infanzia) were transferred in early 1977 to the Regions and local agencies.

Assessorati all'Assistenza delle Province	Provincial Welfare Departments

Assistance to blind, deaf and mute citizens, as well as to the mentally retarded tends to be absorbed by the Communes and Unions of Communes within the limits of the local units for social and medical services which have been foreseen by the public health Reform Proposal under consideration by Parliament.

Communes and Unions of Communes (local government units)

The local Agencies, either due to direct competence (school medicine) or because of the powers transferred to them by the Regions, tend to become the center of the activities relating to prevention, rehabilitation and social integration of the handicapped. Many Regions have enacted or are preparing laws concerning the creation of the local units of social and medical services administered by the Communes and their Unions.

Amministrazione per le Attivita Assistenziali Italiane e Internazionali (AAI) Via Giovanni Lanza, 194 Roma Sen. Ludovico Montini, Presidente Dr. Francesco Sanjust, Dirett. Gen.	Administration for Italian and International Welfare Activities

This agency depends on the Ministry of Interior and performs various welfare activities, among which are those relating to the mentally retarded.

VOLUNTARY ORGANIZATIONS

Primarily concerned with the mentally retarded

ANFFaS (Associazione Nazionale Famiglie di Fanciulli Subnormali) 19, Borgo Sant'Angelo, 00193 Rome	National Association of Retarded Children's Families

ANFFaS had its beginning in Rome in 1958 and has over 100 branches throughout the country with 10,000 members. Several branches have developed special schools and vocational training centers for which they receive funds from public sources and others, as well as daily fees for their assistees as stated above; these facilities are generally run by the respective ANFFaS branches. The Association was the first in Italy that promoted the interest of the parents for a common action. In some Regions ANFFaS branches are adapting their policies to the new politico-administrative situation of the country and their training centers are being transferred to local authorities. ANFFaS is a founding member of the International League of Societies for the Mentally Handicapped.

Others which include mental retardation

Sezione di Neupsichiatria Infantile della Società Italiana di Psichiatria Instituto di Neupsichiatria Infantile dell'Università di Roma Via die Sabelli, 108 Roma Prof. Giovanni Bollea, Direttore	Section on Neuropsychiatry of the Child Italian Psychiatric Society (Member of the International Association for the Scientific Study of Mental Deficiency)
SIAME (Società Italiana per l'Assistenza medico-psico-pedagogica ai Minorati dell'Età Evolutiva) Piazza Lovatelli, 36 Roma	Italian Association for Medical-Psycho-Educational Assistance to Children
Associazione Italiana per l'Assistenza agli Spastici (AIAS) Via Cipro, 4 Roma	Italian Spastics Society (Member of Rehabilitation International)
Lega Italiana di Igiene e Profilassi Mentale c/o Clinica Psichiatrica Universitaria, Roma	Italian League for Mental Health
Jnione Italiana per la Promozione dei Diritti del Minore Via Artisti, 34 Torino	Italian Association for Protection of Rights of Minors

Associazione Italiana per la Riabilitazione dei Minorati Via Capecelatro,66 Milano	Italian Association for Rehabilitation of the Disabled
Pontificia Opera di Assistenza Roma	Vatican Welfare Services

RESEARCH

Some research in the field of mental retardation is carried out in Universities and especially within the Institutes of Neuro-psychiatry and Psychology of children, but there is no research institute with a major interest in mental retardation. However, research in metabolic and chromosomal abnormalities has received increased attention, leading to greater interest in prevention and early detection. In some Regions of Italy, surveys were carried out recently to assess the problem of mental retardation and obtain data needed to evaluate existing services, since the available data related primarily to the institutionalized population.

PUBLICATIONS

Neuropsichiatria Infantile

Annali della Sanita Pubblica

Esperienze di Rieducazione

Rivista AIAS

Partecipazione

Diritti dell'Invalido Civile

Prospettive Sociali e Sanitarie

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents - Both the maternal and children's centers and mental health centers in various provinces and communes evaluate children and youngsters referred to them by social workers, teachers and parents. ANFFaS and its branches provide information and counselling to parents.

Education- The former "differential" classes for mildly retarded children have been abolished and experiments of integration of retarded children in normal school classes are increasingly conducted by Kindergartens and primary schools. There are special schools mostly run by private organizations with public financial contributions. There are also educational programs in residential institutions. On the whole, the need still far outstrips the provisions.

Work training and employment - There are vocational training centers but still few in number; they receive financial aid from the Regions and/or Provinces. There are not yet specific laws for sheltered workshops; therefore, the few existing centers have various forms and trends. There is no law as yet for the integration of retarded citizens in normal working places.

Medical care - Specialized medical care has historically been the responsibility of child psychiatry which includes neurology and neuropathology.

Residential care - There are approximately 100 private residential institutions registered with the Ministry of Health, and an unknown number of other private institutions of smaller size. Only about 30 residential institutions admit adult retarded persons, who in general are cared for in mental hospitals.

Financial assistance- School is free from 6 to 14 years. Some Vocational Training Centers receive financial assistance from the Regions. (For information on disability pensions see above).

Recreation - Some recreation programs in cooperation with voluntary youth groups have been started in various cities. These are spontaneous initiatives which are not part of a general and organized movement. There are some camping programs where retarded children and young adults are accepted, and several special holiday arrangements made by ANFFaS branches. Some summer programs are organized by public and religious agencies or by large commercial enterprises for the handicapped children of their staff members.

Personnel training - The entire para-medical staff, as well as specialized teachers, social workers, etc. at present find themselves in a rather precarious situation because of the legislation under discussion for the reform of high schools and universities. Thus, the intermediate professions will have to be better placed as presently they do not have adequate recognition and, in addition, differences in their qualification levels are numerous.

OTHER INFORMATION FOR VISITORS

Visitors can apply to:

ANFFas
Borgo Sant'Angelo, 19. Roma

AAI
Via Giovanni Lanza, 194, Roma

SIAME
Piazza Lovatelli, 36, Roma

School holidays - December 23 to January 6; months of July, August, and September.

IVORY COAST

(CÔTE D'IVOIRE)

The Republic of Ivory Coast occupies 124,503 square miles on the west coast of Africa between Liberia and Ghana; its population is 6.5 million and its capital is Abidjan. It has been independent from France since 1960, but retains close ties with France under a 1961 agreement; French is the official language. Religions include animist (65%), Moslem (23%) and Christian (12%). Ninety percent of the people are involved in agriculture, stock raising, forestry and fishing; coffee, cocoa, tropical woods and bananas are the main exports. Industry is increasing and there is a favorable balance of trade. It is the most prosperous of tropical African nations in terms of per capita income; the literacy rate is one of the highest in Africa (65%).

GOVERNMENT AGENCY WITH MENTAL RETARDATION RESPONSIBILITY

Institut National de Santé Publique	National Institute of Public Health
Section de Psychopathologie et Hygiène Mentale	Section on Psychopathology and Mental Hygiene
Abidjan	

VOLUNTARY ORGANIZATION

Association ivoirienne de Parents d'Enfants inadaptés mentaux (A.I.P.E.H.M.)	The Ivory Coast Association of Parents of Mentally Retarded Children
Boîte postale 251 Abidjan	

This organization is affiliated with the French national association, U.N.A.P.E.I.

BRIEF PROGRAM NOTES

The Vridi day school (centre médico-pédagogique) opened by the Ivory Coast Association in 1969 represents one of the first such efforts by involved parents of retarded children in Black Africa. In 1971, it was serving 21 mildly through profoundly handicapped African and European children. The National Institute of Public Health was providing diagnostic advice, and some staff were being trained at the school. It was hoped that government money for African children could be obtained for those children whose parents were unable to pay the fees. Presently, it serves both boys and girls, 6 to 16 years old. A group of volunteers provides 5 half-days a week of occupational therapy (ergotherapy) activities, physical education, simple academics and some training; the center has plans for more formal vocational work training.

An Institute for Social Training exists to train social workers, social work aides, kindergarten teachers and aides; training of "éducateurs spécialisés" (care workers) will soon be included.

In 1976, the International Council meeting of L'Arche movement was held in the Ivory Coast, and at the same time the first L'Arche community home in Africa, Akundyue Lika, was officially opened.

Under sponsorship of UNESCO, a meeting of representatives of 19 West and Central African nations was held in Abidjan in 1977, to discuss the development of services to handicapped people. Ivory Coast has centers for blind, deaf-mute, physically handicapped children, for vagabond children and for children with social or behavior problems. The Conference encouraged creation of a coordinating organization of the various groups responsible for handicapped persons. The participating countries all have the common problem: migration from country to city (Abidjan has grown from a population of 300,000 to 1 million in less than 10 years) with resulting family break-up, early delinquency and general acceleration of social problems.

Participation in the Conference from the voluntary sector included members of the L'Arche community and the Ivory Coast Association; Mme. M. Biérent of U.N.A.P.E.I. represented the International League of Societies for the Mentally Handicapped.

OTHER INFORMATION FOR VISITORS

This can be obtained from:

Association ivoirienne de Parents d'Enfants inadaptés mentaux
Boîte postale 251
Abidjan

School holidays - The long holiday is from mid-July to mid-September.

JAMAICA

Jamaica is the third largest island in the Caribbean with an area of 4,232 square miles (slightly smaller than Connecticut), and a multiracial population of nearly two million, 50% under 20 years of age and over 90% of African and mixed descent. English is the official language although the Jamaican dialect is not always understood by visitors. A British colony for 300 years, Jamaica became an independent member of the Commonwealth in 1962, with a parliamentary type of government. Two-thirds of the population live in rural areas but agricultural products are now of less economic importance than mining, tourism and manufacturing. Rapid population growth, overcrowded cities, an overburdened educational system, unemployment and underemployment are pressing problems.

There is high regard for education; the literacy rate is approximately 70% and there is an active literacy program. The University of the West Indies which has campuses in Jamaica, Barbados and Trinidad, has a wide range of training programs in arts, sciences, agriculture, engineering, education, social sciences, law and medicine.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Education
National Heroes Circle
Kingston

Ministry of Social Security
National Heroes Circle, Kingston

Jamaica Council for the Handicapped
89 Old Hope Road, Kingston 6

Ministry of Health and Environmental Control
Caledonia Ave., Kingston

Ministry of Youth and Community Development
Kingston Mall, Kingston

Child Care and Protection Division
11 Melmac Ave., Kingston 5

Ministry of Local Government
Headquarters House
Duke Street, Kingston

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Citizen

Jamaica Association for Mentally Handicapped Children
P.O. Box 224, Golding Ave., Kingston 7

The Jamaica Association was founded in 1956 by Mr. Randolph Lopez, J.P., who was its president until his death in 1966. The JAMHC is the only agency providing services solely for the mentally retarded. There are local parish branches in 8 of the 13 parishes.

Other voluntary organizations which include mental retardation

Caribbean Institute on Mental Retardation and Developmental
Disabilities -CIMR [See Caribbean Association on Mental Retardation-
94 Old Hope Road CAMR - in section on International (Regional)
Kingston 6 Organizations, Part I]

Since January 1976 when it was founded by CAMR, aided by the Canadian International Development Agency, the Caribbean Institute has functioned as the technical professional arm of the Caribbean Association which represents voluntary agencies of the Caribbean region. The main functions of the Institute are short-term training courses, consultations, exchanges of information and dissemination of information in the Caribbean region, stimulation of services and training and promotion of research. The Institute works closely with the JAMHC in the development of this program.

PUBLICATIONS

Directory of Services for the Handicapped (1977)
Caribbean Institute on Mental Retardation and Developmental
Disabilities
94 Old Hope Road
Kingston 6

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - A service is operated by the JAMHC in conjunction with the Jamaica Council for the Handicapped and the University Hospital of the West Indies, which uses National Youth Service workers trained in developmental screening and assessment. Diagnostic and counselling services are also provided within these facilities. This service is headed by a medical practitioner and staffed by a person trained in education and psychology, and there is a team of persons on a part-time basis to whom referrals can be made. Very little use is now made of psychiatric and psychological services since these are very scarce and are not usually available to the mentally retarded. In fact, in recent years a prescriptive approach has been taken and very little formal psychological assessment is performed.

Education - The JAMHC has expanded its program considerably in the last 5 years from a school which had 70 children to nearly 700 special education places throughout the Island. These consist of segregated schools in five different towns as well as a large number of "Unit Classes" which have been established in regular schools. These come under the administrative control of the school board of the School of Hope and the senior person in charge is the Principal of the School of Hope. A wide range of types and degrees of severity of mental retardation are served by this program. The Association undertook this program of expansion by means of establishing branches and local societies in the different parishes on the Island. Each of these has undertaken responsibility for establishing special classes or schools in that area. This program has the backing of the Ministry of Education which, since 1975, has underwritten the cost of special education by giving substantial grants to the various voluntary agencies providing special education services, including the mentally retarded. A 5-year development plan for special education is presently being formulated.

An early stimulation project was begun under the auspices of the Jamaica Council for the Handicapped, and now serves between 180-200 retarded and other handicapped children. This project is run in association with the JAMHC which provides many of the referrals to it. At present it serves Kingston and the surrounding areas only. In 1977 the project was adopted by the Ministry of Social Security and in the future will be financed by Government. Much of the expansion of this and other projects has been facilitated by government programs of Special Employment and National Youth Service.

Work training and employment - The Ministry of Social Security, through its agency, the Jamaica Council for the Handicapped, began a vocational rehabilitation program for all handicapped in 1974. It now comprises an Assessment and Guidance Center for 50 persons; and Office Training Center for 30; and 4 production workshops with a total client population of approximately 60. A pre-vocational unit is operated also by the School of Hope.

Medical care - is provided within the regular health service.

Residential care - is quite inadequate. Care for approximately 200-300 children is provided by government agencies and the Lopez Home operated by the JAMHC for 55 moderately and severely retarded children. The Ministry of Health provides a residential unit for approximately 30-40 severely retarded and disturbed children at Bellevue Hospital (a mental hospital). The Ministry of Local Government provides residential service to approximately 65 severely mentally and physically handicapped children at the Eventide Home. The Ministry of Youth, through its agency Child Care and Protection Division, also provides residential care for some handicapped children who are abandoned and taken into care by the Government. In 1976 a habilitation program was begun at three of these institutions utilizing special employment workers in developmental programs.

Financial assistance - The JAMHC and the Jamaica Council for the Handicapped run the major programs for the retarded in Jamaica. Although the Ministry of Education substantially underwrites the cost of the educational program, the other activities of the Association have to be supported by fund raising. Some children living in the Lopez Home are partially subsidized by the Child Care Division; others are paid for by their parents, but in both instances this is inadequate for their full support. Fund raising is therefore a fundamental part of the Association's activities.

Recreation - Most of the projects and programs for the retarded have organized leisure time activities but these are not adequate to meet the need. Various organizations,or young people assist in these programs.

Research - Small research projects have been carried out by graduate and undergraduate students at the University of the West Indies. These have been coordinated most often by the Jamaica Association or by the Caribbean Institute on Mental Retardation. Research into causes, evaluation of programs, prevalence of developmental disabilities and attitudes of parents and public has been conducted.

Personnel training - With a grant from the Netherlands Covernment, a teacher training program was begun in 1976 at Mico Teacher Training College. Most of the teachers in the special education program are ordinary trained teachers, graduates of teacher training colleges in Jamaica. Some of the staff are Peace Corps volunteers who have training in special education, and there are a few Jamaicans who have received special education training overseas. Anticipated in 1978 is a diagnostic center for learning problems. A large number of short-term inservice courses in special education have been held both by the Caribbean Institute and by the Principal of the School of Hope in conjunction with the Partners of the Americas.

Planning - has been undertaken in a number of areas during the past few years. Special education: a Caribbean regional workshop on planning special education services was held in 1976 and out of this work the 5-year development plan for special education in Jamaica was undertaken, which is now being finalized. Residential services: a workshop on planning residential services was undertaken and a report, "Guidelines for Residential Services for Handicapped Persons," was issued in June 1977. A 5-year plan for the development of a vocational rehabilitation program was written by an ILO advisor and is now being revised. Planning and consideration is now being given to the role of government and the voluntary agencies in the future development of services for the handicapped. JAMHC is planning a program of de-institutionalization for the Lopez Home in which it intends reducing the number of persons living there by 50% over the next 3 years.

OTHER INFORMATION FOR VISITORS

Information and assistance in planning visits may be requested from the following:

Jamaica Association for Mentally Handicapped Children

Jamaica Council for the Handicapped

Caribbean Institute on Mental Retardation and Developmental Disabilities

School holidays - Mid-July through the first week of September; usually 2-1/2 weeks for Easter and 3 weeks for Christmas.

JAPAN

Area - 377,000 km^2 (145,522 sq. miles), slightly larger than Norway and 90% mountains; population - 110,000,000, a density of 290 km^2 (751/sq. ml.), concentrated around the large cities. The Tokyo metropolitan area has a population of 11 million. Government - consitutional monarchy with a bi-cameral parliament (Diet); local government functions through the 47 prefectures. During the past two decades Japanese economy has been characterized by intensive industrialization and urbanization, and a standard of living that is the highest in Asia.

The government has pursued a policy of controlling population growth and high sanitary and health standards have resulted in a life expectancy rate of 75 years.

Compulsory education consists of 6 years of elementary and 3 years of secondary school; the literacy rate is 97%. Higher education is provided through more than 600 junior colleges, colleges and universities.

Social welfare was traditionally the responsibility of the family, employers or private organizations, but government has increasingly begun to provide a still modest but broad range of assistance programs, through health insurance, pensions, minimum wage law, etc. and the operation or subsidizing of a variety of categorical services.

The first specialized institution for retarded children was founded in 1891. Their care and education was primarily in the hands of philanthropic pioneers until the enactment of a series of laws which gave legal basis for development of services, namely the Child Welfare Law of 1947, the Education Law of 1947, the Mental Health Law of 1950, and the Law for the Welfare of Mentally Deficient Persons (over 18 years of age) in 1960. Voluntary associations (see below) and the pressure of public opinion have played a strong role in bringing about these and later legislative changes.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Ministeries

Ministry of Health and Welfare 1-2-2, Kasumigaseki Chiyoda-ku, Tokyo 100	(Koseisho)
Bureau of Children and Homes	(Jido-Katei Kyoku)
Section of Welfare for Handicapped Children	(Shogai Fukushi Ka)
Section for Child and Maternal Health	(Boshi Eisei Ka)
Bureau of Public Health	(Koshu Eisei Kyoku)
Mental Health Section	(Seishin Eisei Ka)

Ministry of Education
3-2-2, Kasumigaseki
Chiyoda-ku, Tokyo 100
(Mombusho)

Bureau of Primary and Secondary Education
(Shoto-Chuto Kyoiku Kyoku)

Section for Special Education
(Tokushu Kyoiku Ka)

Ministry of Labor
1-3-1, Otemachi
Chiyoda-ku, Tokyo 100
(Rodosho)

Prefectural agencies - Services are provided through the Children's Section, or Mother and Child Section as well as through Child Guidance Centers and Consultation Centers for mentally retarded persons in each Prefecture. Addresses of sections and centers are available through the Bureau of Children and Homes, Ministry of Health and Welfare.

National planning - Seishin Hakujakuji Sha Shingi Kai is a 15-member committee representing education, institutions and laws, appointed by the Ministers of Health and Welfare and of Education, with the objective to coordinate all activities related to mental retardation. There are also 47 prefectural committees with the same objective.

VOLUNTARY ORGANIZATIONS

Primary concern in mental retardation
Professional

Japanese Association for the Scientific Study of Mental Deficiency (JASSMD)
c/o Chichibu Gakuen
860, Shimoarai, Tokorozawa-shi
Saitama 359
(Nihon Seishin Hakujaku Kenkyu Kyokai)
Founded in 1965
Member IASSMD
Osamu Kan, M.D., President

Japanese Association for the Care and Training of the Mentally Retarded (in institutions)
7-5-2 Roppongi, Minato-ku
Tokyo 106
(Nihon Seishin Hakujakusha Aigo Kyokai)
Founded in 1934
Affiliate member ILSMH
Fukuji Tomaru, President

Japanese Association for Teachers in Special Education for the Retarded
c/o Zenkoku Tokushu Gakko-cho Kai
Kokuritsu Kyoiku Kaikan
3-2-3 Kasumigaseki
Chiyoda-ku, Tokyo 100
(Zen Nippon Tokushu Kyoiku Kenkyu Renmei)
Founded in 1952
Prof. Emer. Yasumasa Miki, Pres.

Association of Employment Promotion of the Handicapped
3-13-5 Ginza, Chuo-ku
Tokyo 104
(Zenkoku Shinshinshogaisha Koyo Sokushin Kyokai)
Founded in 1975
Shigeo Nagano, President

Citizen

Japanese Parents' Association for the Mentally Retarded
Dai 7 Mori Bldg.
2 Shiba Nishikubo Tomoe-cho
Minato-ku, Tokyo 105

(Zen Nippon Seishin Hakujakusha Ikuseikai)
Founded in 1952
National member ILSMH

(A national association of brothers and sisters of the retarded also functions in cooperation with the Japanese Parents Association)

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Japan League for the Mentally Retarded (JLMR)
2-16-1, Nishi-shinbashi
Minato-ku. Tokyo 105

(Nihon Seishin Hakujakusha Fukushi Renmei)
Founded in 1974
Osamu Kan, M.D., President

The above mentioned five organizations are the professional and citizen member organizations of this important coordinating body.

Other organizations which include mental retardation

Japanese Association for Physically Handicapped Children
3-13-5 Higaski Ikeburkuro
Toshima-ku, Tokyo 170

(Nihon Shitai Fujiyuji Kyokai)

National Association to Care for Severely Handicapped
2-30-9 Mishuku, Setagaya-ku
Tokyo 154

(Zenkoku Jusho Shinshin Shogaiji (sha) wo Mamoru Kai)

Railway Welfare Association
Social Welfare Division
5-1 Kojimaci, Chiyoda-ku
Tokyo 102

(Tetsudo Kosai Kai)
Operates institution for the mentally retarded

RESEARCH

Mental Deficiency Research Section
National Institute of Mental Health
(Ministry of Health and Welfare)
1-7-3 Konodai, Ichikawa, Chiba 272
Director of the Section: Yoshiro Sakurai, PSW

National Insitute of Special Education
(Ministry of Education)
2360 Nobi, Yokosuka, Kanagawa 239
Director: Yasuo Tsujimura

Section of Human Genetics
National Institute of Genetics
(Ministry of Health & Welfare)
1-111 Yada, Mishima, Shizuoka 411
Director of the Section: Ei Matsunaga, M.D., D.Sc.

Research Institute of Special Education
Tokyo Gakugei University
4-1-1 Nukuikita-machi, Koganei-shi, Tokyo 184
Director of the Institute: Prof. Kenjiro Owada

National Institute of Disorders in Mental and
Neuro-muscular Development (under planning)

Institute for Developmental Research
Aichi Prefectural Colony
Kamiya-cho, Kasugai, Aichi 480-03
Director of the Institute: Ujihiro Murakami, M.D.

Tokyo Metropolitan Institute for Neuron Sciences
Musashidai, Fuchu, Tokyo 183

In addition the following specific research groups also have concern with mental retardation:

Congenital Anomalies Research Association of Japan
Japanese Association of Human Genetics
Japanese Association of Child Psychiatry
Association of Pediatric Psychiatry and Neurology
Japanese Association of Special Education

PUBLICATIONS

Japanese Journal of the Scientific Study of Mental Deficiency
Biannual: Official organ of JASSMD

Japanese Journal of Child Psychiatry
Quarterly: Official organ of the Japanese Association of Child Psychiatry (with English abstracts)

Psychiatria et Neurologia Paediatrica Japonica
Quarterly: edited by Shoni Seishin Shinkei Gaku Kenkyu Kai

Japanese Journal of Special Education
Three issues annually: Official organ of the Japanese Association of Special Education; with English abstracts

Seishin Hakujakuji Kenkyu (Mentally Retarded Child)
Monthly: edited by the Japanese Association of Teachers in Special Education for the Retarded

Aigo
Monthly: edited and published by the Japanese Association for Care and Training of the Mentally Retarded

Te wo Tsunagu Oya Tachi (Parents Hand-in-Hand)
Monthly: Official organ of the Japanese Association of Parents of the Retarded

Seishin Hakujakusha Mondai Hakusho (White Paper on the Problem of Mentally Retarded Persons)
Annual: edited by Japan League for the Mentally Retarded

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents - Child Guidance Centers in each Prefecture are legally responsible for those programs for the retarded under 18 years of age. For those who are older, Mentally Retarded Persons Consultation Centers in each Prefecture are responsible. Many university hospitals, general hospitals and psychology or education departments of universities also offer these services on a voluntary basis, and a few specialized community clinics have been initiated. A 1961 amendment to the Child Welfare Law provides for mandatory medical examination of all children at age 3, including an examination of mental development; at age 6 children are examined and tested by school authorities.

Education - There are almost 18,000 special classes for retarded children in ordinary elementary and secondary schools. They are for mildly retarded children with no physical or behavioral problems. Almost 114,000 children attend these classes. For mildly retarded children with difficulties in social adjustment, and for those diagnosed as moderately retarded without severe physical and/or mental disorders, there are 200 special schools (elementary, secondary and high school) with 15,000 pupils. After 1979 it is planned that special schooling will be mandatory for all who want to go to school regardless of nature and degree of retardation.

Special classes and special schools are operated under the school system of the Ministry of Education. For the more handicapped moderately and severely retarded under 18 years, there are 175 day care centers, public and private, operated under the Ministry of Health and Welfare through the local welfare system, serving more than 7,000 children. Pre-school education for retarded youngsters is now developing both in special facilities and in ordinary kindergarten or nursery schools. The integration principle is being emphasized in those programs.

Work training and employment- Vocational training is emphasized both in residential institutions and the special schools or classes. Programs for vocational training centers and sheltered workshops are operated under the Ministry of Health and Welfare through the local welfare system. There are 62 vocational training centers and about 60 sheltered workshops. An employment adjustment training program administered under the Employment Law had been limited primarily to the physically handicapped but, in 1976, an amendment to the Law opened this service to mentally retarded persons.

Under the welfare system, there are two programs for promoting employment of retarded persons. One is the training for vocational adjustment program in which the retarded person is entrusted to a business owner for training on the assumption that he will be employed there following completion of this training period, which is normally 6 months but can be extended to one year if necessary. The other program is the vocational guidance "parent system," which provides for entrusting the retarded person to a business manager or other private individual during a set period for personal guidance and skill training, thus promoting the handicapped person's employment and workplace stability leading to greater self-sufficiency.

The Ministry of Labor is also concerned with employment promotion programs under the Physically Handicapped Person's Employment Promotion Law, which was issued in 1960.

Medical care - There are no specially organized services or programs of medical care for the retarded. Screening tests for PKU and some other inborn metabolic errors are going to be applied to all infants soon. Pediatricians and psychiatrists in hospital and private practice are now seeing many more retarded persons than before.

Residential care - There are more than 650 residential institutions for almost 50,000 mentally retarded persons. Until now, the institutions for children and institutions for adults have been separate; exceptions are being made now for older adolescents. Institutions have been of relatively small size with an average of 70 residents; more recently, prefectural governments were, and still are building large, multi-functioned institutions, the size of which range from 300 to 1,000 resident accommodations.

Almost one-third of all residential institutions for the retarded are public, and the remaining two-thirds are private. Two institutions are run by the national government: Chichibu Gakuen (Tokorozawa, Saitama 359) for children, and Nozomi-no-Sono (Takasaki Gunma 370) for adults.

Financial assistance - A special child rearing allowance is given to guardians caring for moderately or severely mentally or physically handicapped persons under the age of 20 in their homes. An additional grant is given when severely handicapped people (regardless of age) at home require special care on a daily basis. A handicapped person's welfare pension (non-contributory) is available to moderately or severely retarded persons 20 years or older, depending on a family means test. Since 1966 certain tax exemption has been provided for families with mentally retarded children, regardless of income.

An as yet limited program for financial security for mentally retarded persons following their parents' death has been developed by the Group Life Insurance Company of Japan, with cooperation from the National Council of Social Welfare and the Japanese Parents Association for the Retarded.

Recreation - Programs so far have been developed largely by the parents associations with support from voluntary community organizations. Summer camps have been provided where parents can stay with their retarded child.

Research - In addition to the national research institutes (see above) many universities and colleges are undertaking studies in the biological and behavioral aspects of mental retardation. It is intended that the Japanese Association for the Scientific Study of Mental Deficiency will increasingly act as a coordinating body and will sponsor informational exchange on research activities relating efforts in Japan to the international scene.

Personnel training - More than 50 universities and colleges have courses in special education. A 4-year course and a 2-year postgraduate course in the education department is prescribed for special education teachers. The only formal training program for personnel working in institutions is the Personnel Training School attached to the National Institution, Chichibu Gakuen.

Planning and coordination on the national government level is primarily handled through the Central Council for Countermeasures for Mentally and Physically Handicapped Persons under the Fundamental Law for Countermeasures for Mentally and Physically Handicapped Persons enacted in 1970. The Advisory Committees on Child Welfare, on Mental Health, and on the Welfare of Retarded Persons, all functioning under the Ministry of Health and Welfare, and related advisory committees under the Ministry of Education discuss legislation, standards, system of care, prevention, etc. and make recommendations to the Ministers.

Much initiative for planning and for innovative action has also come from the voluntary organizations, especially the Parents' Association for the Mentally Retarded, the Association for the Care and Training of the Mentally Retarded, and the Association of Teachers in Special Education for the Retarded.

OTHER INFORMATION FOR VISITORS

Visitors from abroad are recommended to make contact with any one of the following agencies in advance:

Japan League for the Mentally Retarded
7-5-2 Roppongi, Minato-ku, Tokyo 106
Tel.: (03) 401-6827

Liaison Officer
Minister's Secretariat, Ministry of Health and Welfare
1-2-2 Kasumigaseki, Chiyoda-ku, Tokyo 100
Tel.: (03) 503-1711

Planning and Coordination Division
Science and International Affairs Bureau
Ministry of Education
3-2-2 Kasumigaseki, Chiyoda-ku, Tokyo 100
Tel.: (03) 581-4211

School holidays in Japan are usually as follows: last two weeks of March; latter half of July and all of August; last week of December and first week of January.

JORDAN

Jordan, a constitutional monarchy in southwest Asia, has a population of approximately 2,780,000, with about 52% below 15 years old, and an area of 37,738 square miles. The capital is Amman, the official language is Arabic, and the religions practiced are Moslem (94%) and Christian (6%). The population is primarily Arab. The main sources of income are agriculture (grains, vegetables, fruits, etc.) and tourism. Jordan has plateaus and highlands in its eastern and western (Palestinian) sections which are divided by the Jordan River Valley and the Dead Sea. The climate is generally quite dry, even desert-like in some areas, with western Jordan and eastern Jordan north and west of Amman generally having more rain than other parts.

There is a bicameral parliament in which the 60 members of the Chamber of Deputies are elected for 4 years by male suffrage, and the 30 members of the Senate are appointed by the King. Education is free and compulsory for primary and secondary levels. There are 17 technical schools, 11 schools of nursing, trades and agriculture, one teacher training college, and a university. The country depends a great deal on voluntary social welfare agencies, both local and foreign, for social services.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Labor
Department of Social Affairs
Amman

VOLUNTARY ORGANIZATIONS

Swedish Organization for Individual Relief
P.O. Box 2378
Amman

Mental Health Society
P.O. Box 9048 Jebel Luweibdeh
Amman

Young Women Moslem Association
Post Office / Sport City Area
Amman

Christian Reformed World Relief Committee
P.O. Box 5131
Amman

(Does not run direct services, but supports services both professionally and financially and coordinates societies working with the handicapped)

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Education, work training, residential care and financial assistance - Between 1968 and 1977, 9 specialized centers were developed, primarily in Amman with one in Irbed and one in Zerka. Six are privately run by 3 voluntary agencies, some with government subsidy, and three are run by the government. The 9 centers include a government-run vocational rehabilitation center for adults, a residential facility for severely retarded children, and 7 day schools for from 20-60 children each. One of the voluntary agencies provides family counseling, home training, and financial assistance to families, and the Department of Social Affairs sometimes gives hardship assistance and provides social work services to families whose children are without other services.

Personnel training - In-service training is generally the method of training used, often with assistance from foreign specialists. Some of the 9 centers provide courses for éducateurs, and a course has been given on mental retardation at the University of Jordan. The Department of Social Affairs is taking an active part in promoting training of personnel for the handicapped. The University of Jordan is establishing a Research and Training Center/Rehabilitation and Special Education, affiliated with Michigan State University. Training programs are anticipated to be in operation by 1980.

OTHER INFORMATION FOR VISITORS

Information may be requested from the Department of Social Affairs or any of the voluntary societies.

School holidays - June, July and August.

KENYA

Kenya, former British Colony and Protectorate which became independent in 1963, occupies an area of 224,960 square miles on the east coast of Africa and has a population of 13.4 million, about half are under 15 years of age. The capital, Nairobi, has 700,000 people, the next largest city, Mombasa, over 300,000.

Independence had been preceded by nearly a decade of tribal uprisings and violence. Under President Jomo Kenyatta the country has reached a state of full self-government. There is close cooperation with the neighboring State of Tanzania in interterritorial matters such as currency, rail and postal services.

The northern region is arid so that economic production is centered in the south coastal area and the high plateau region. While Kenya is mainly agricultural (Africa's largest tea producer), both manufacturing and tourism have increased substantially since independence, as have health centers and schools. Severe droughts in 1971 and 1973 caused some setbacks in developments.

Kenya people come from numerous tribes of which even the largest does not claim more than 20% of the population. Less than 3% are non-Africans. Swahili is the official language, but Bantu and Kikuyu are recognized, and English is used for international communications.

The educational system, originally supported by Protestant and Catholic church groups, is increasingly supported by the government, and now more than half of the secondary schools are completely or partially government supported. About 40% of all children of school age (6 to 16) attend school, and 60% of primary age children are in school; 20% of those who finish primary school go on to secondary school. There are several technical schools and 26 teacher training colleges. The University of Nairobi is part of the U. of East Africa. In 1967, the Teachers' Service Commission was set up by the Government to provide a unified teaching service.

A Conference on Special Education and Mental Retardation was held in Nairobi early in 1977, planned and coordinated by the Ministry of Education and the U.S. Peace Corps, Kenya, with participation by two representatives of the U.S. President's Committee on Mental Retardation and Kenyan and other leaders in both governmental and voluntary sectors. The conference was chaired by Miss Kristina Kenyatta, head of Special Education in the Ministry of Education.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Health
Director Medical Services
P.O. Box 30016, Nairobi

Ministry of Education
Director of Special Education
P.O. Box 30040, Nairobi

Ministry of Cooperatives and Social Services
Department of Community Development and Social Services
Gill House, P.O. Box 30276, Nairobi

Ministry of Labour
Principal Labour Office
P.O. Box 326, Nairobi

VOLUNTARY ORGANIZATIONS

Concerned primarily with mental retardation

The Kenya Society for Mentally Handicapped Children
P.O. Box 42365, Nairobi

Founded in 1969, The Society has supported the Jacaranda School and has also been able to give some assistance to the ten small school units which exist in different parts of the country. In 1972 The Society was accepted as a member of the International League of Societies for the Mentally Handicapped.

The Society of Parents & Friends of Handicapped Children
P.O. Box 44516, Nairobi

Founded in 1975 this group is concerned with all handicapped children.

(These two groups plan to unite and expand to a national focus.)

Other

Association for the Physically Disabled of Kenya
Children's Orthopedic Clinic
Lagos Bohra Road, P.O. Box 46747, Nairobi

Serves children with cerebral palsy and other severely physically handicapped children who are also mentally retarded.

PUBLICATIONS

The East African Medical Journal has published articles relating to mental retardation.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Services exist for children, but not adults, and not for profoundly retarded persons; a total of about 238 children are now served in all educational and pre-vocational programs.

Case finding, Diagnosis and Assessment, Consultation to Parents - Case finding is done by health visitors and social workers. Diagnosis, assessment and consultation are provided by a children's clinic run by the Nairobi City Council Public Health Department; otherwise it is done by private practitioners or at Maternal and Child Health clinics, at hospitals, or the Jacaranda School. The Kenya Society for Mentally Handicapped Children and the Society of Parents and Friends of Handicapped Children also provide parent counseling.

Education and Work Training - There are 3 special schools for retarded children. The Jacaranda School, started in the early 1960's as the St. Nicholas School, now serves 113 mildly through severely retarded and some multiply handicapped children. It is run by the Kenya Society for Mentally Handicapped Children, but receives 80% of its funding from the government, including teachers provided by the Teachers Service Commission of the government; there are also Peace Corps teachers and other volunteers, one Danish and two Kenyan. The school has 3 sections, the nursery unit, the primary education unit, and the pre-vocational unit; the latter, for adolescents, has been assisted by the National Rehabilitation Advisory Council of the Ministry of Cooperatives and Social Services.

The Treeside School in Nairobi started in 1976 serves 15 children of primary school age, mostly with mild retardation, and is run by a private group with some government funding; its teachers are Peace Corps volunteers. Fees for Kenyans, but not foreigners, are based on ability to pay.

The Aga Khan Special School in Mombasa, in the Coast Province, was established in 1958 and has now an enrollment of 72 children (44 boys and 28 girls) with 5 teachers.

There are also 8 classes,or units, attached to primary schools,and one at the Mathari Hospital serving children referred for observation and treatment; 2 are in Nairobi and 6 are in other areas. About 100 children are served, the classes including 5 to 25 children each.

Residential Care - There are no residential services available, except for 19 adolescents at present living in the Mathari Hospital. There is a need for boarding schools but it is hoped to avoid building any congregate institutions.

Personnel training - An early beginning in training teachers to work with mentally handicapped children was started in the mid-1960's by an English consultant to the teacher training colleges; she emphasized use of native materials and practical ways of helping the children in an integrated situation. One year training courses are now available for qualified primary school teachers with a special interest in mental retardation. Mathari Hospital gives a 2 year mental nurse training course. One of its staff members is qualified both as a nurse and as a teacher of the mentally handicapped.

Planning - Recommendations from the recent Special Education and Mental Retardation Conference include establishment of a national center for information, referral, coordination and promotion of services and training; campaigns of prevention and public information toward attitude change were seen as essential.

OTHER INFORMATION FOR VISITORS

School holidays - Usual school holiday periods are scheduled for Easter, August, and November to mid-January

Further information - This can be obtained from:

Ministry of Education
Department of Special Education
P.O. Box 30040, Nairobi

The Kenya Society for Mentally Handicapped Children
P.O. Box 42365, Nairobi

REPUBLIC OF KOREA

Area - 38,000 sq. miles; population - 33 million (estimated). The people of this densely populated country are of Tungusic origin, related to the Mongolians with some Chinese mixture. Among the main religious groups are Buddhism, Shamanism, Confucianism, and Christianity (about 10%). The country's recorded history goes back to 1,000 B.C.

Korea is a republic with executive power vested in the President who is elected by direct and secret ballot. The Prime Minister and other ministers serve at the pleasure of the President. There is a unicameral National Assembly.

Korea is moving rapidly from an agricultural economy to agricultural-industry balance. Fishing and forestry are also important. Main crops are rice, vegetables, beans and fruit, with a growing poultry and dairy industry. Industrial development is as yet limited but steadily growing, with a major element being the existence of abundant cheap labor. There are important natural resources in tungsten, bituminous coal and cement. Exports include textiles (especially silk), cement, plywood and wigs.

Elementary education is compulsory for a minimum of 6 years, and the school system is being improved. Although there continues to be a severe shortage of schools and teachers, 95% of school age children are attending primary school. (Some schools have double shifts, with 80 or more children in a class). Special education services have begun only recently. In 1963, special education expenditures totaled but 4% of the primary education budget and were limited to blind and deaf children; the situation has not changed much in subsequent years.

Protective legislation has been enacted in the areas of maternal and child welfare, and a very primitive type of public assistance. Government five-year plans have emphasized economic development, and there has been tremendous economic growth in addition to recovering from the 1950-53 Conflict. Beginning with 1972, the five-year plans increasingly emphasize social development. During the reconstruction period following the division of the country and the subsequent Conflict, Korea received considerable aid in the health and social welfare field through the United Nations, from individual countries (primarily the United States), and from voluntary health and welfare agencies. This aid is decreasing as Korea is becoming more able to take care of its own.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Public Health and Social Affairs, Seoul

Women and Children's Bureau

Bureau of Medical Affairs
National Mental Hospital

National Institute for Mentally Retarded Children
520 Soo Yoo-Dong, Sungpuk-Ku

Ministry of Education, Seoul

Bureau of Common Education

Department of Special Education
#1 Se Jong-Ro, Choong-Ku

There are no other official or quasi-official agencies which have specific responsibilities in the field of mental retardation, or major provincial governmental agencies active in mental retardation. All governmental activity is as yet on the national level.

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation
Professional and citizen

Korean Association for Mentally Retarded Children
381-1 Dobong-dong, Dobong-ku
Seoul

Started in 1968, as a result of a seminar and a first meeting of parents of mentally retarded children, the Association has been a member of the International League of Societies for the Mentally Handicapped since 1968. It attempts to publicize facts and change old misconceptions by providing information to parents, professional workers and the general public.

Others which include concern for the mentally retarded

Association for the Study of Special Education
2 Ka, Sin Moon Ro, Chongro-Ku, Seoul

Ja Haeng Hoe
173-14 Dong Kyo-Dong, Mapo-Ku, Seoul

(This organization provides direct services to children in need).

As yet, other national voluntary organizations have not specifically included mental retardation in their interests, although certain ones are in fact serving some retarded individuals in their general programs. For several years, Korea Church World Service (CPO Box 63, Seoul) has provided on-going consultation to the national government and to the Korean Association for Mentally Retarded Children, through its social welfast consultants.

RESEARCH

There is no research in mental retardation as yet at any government or voluntary level, except that the National Institute for Mentally Retarded Children is charged with collection and preservation of certain statistical data on the persons it cares for.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

At the present time, South Korea has very little direct service designed for the special needs of the retarded. There is no overall nationwide program, government or private, either to provide services or to promote understanding of retardation and the needs and capabilities of mentally retarded persons. Hence, all services are isolated, the result of concern of single persons, groups, or government offices.

Case finding, diagnosis and assessment, consultation to parents - have not been developed.

Education, work training and employment - There are no special education classes in the public schools, and there are only 3 or 4 private facilities; for example, the Mental Retardation Welfare Nursery School (113-3 Hadan-Dong, Suh-Ku, Pusan) started in 1967, which is approved by and receiving limited funding from the provincial educational authority. Retarded young people can enter the vocational training schools (government and private) if they pass the qualifying examinations and pay the tuition. There is no employment service for any citizen, except for a few public employment agencies in Seoul, nor is there medical care designed especially for the mentally retarded.

Residential activities - There is a national - government residence facility, the National Institute for the Mentally Retarded (520 Soo Yoo-Dong, Sungpuk-Ku, Seoul) which has 180 residents ranging in age from 8 to 18, and in I.Q. up to 80. It was begun in 1948 (directly after the Republic of Korea regained independence). Throughout the more than 600 children's institutions there are many children who have been abandoned because of retardation, but among these institutions none cares only for the retarded. The Ministry of Health and Social Affairs at the national level is urging such special services and there is beginning interest in providing this. For example, the Hankuk Lip Reading School (for deaf-mutes), 21 Kusu-Dong, Mapo-Ku, Seoul, is now providing some classes for retarded children. Holt Adoption Program, a U.S.A. financed and directed agency, has cared for many retarded children in its Il San Orphanage, and has set up a residential, educational and vocational training program which can serve as a model for orphanages shifting to care for the retarded.

Financial assistance for the retarded as such is not provided; government assistance for any citizen is a mere pittance, and the voluntary agency assistance (primarily United States dollars) which has been directed mainly to institutional assistance, is now shifting to assistance to families.

Recreation programs are limited to the few which are sponsored by church or social centers (missionary-sponsored).

Personnel training - There is limited special material in schools (vocational training or college) aimed at increasing understanding of mental retardation and the mentally retarded; the only courses for training personnel in any service to the retarded are given at the Hankuk School for Social Work in Taegu (2594 Dae Myung-Dong) which has begun to offer special education training in this area, using for practical training its own special schools for the deaf, blind, physically handicapped and the mentally retarded.

OTHER INFORMATION FOR VISITORS

Information may be requested from the Women's and Children's Bureau, Ministry of Public Health and Social Affairs, Seoul.

School holidays - July and August

KUWAIT

Kuwait, an Arab state formerly under British protection, became fully independent in 1961. It is located on the northeastern corner of the Arabian Peninsula, has an area of 6,880 sq. miles, and a tropical desert climate, except for the humid coast. Summer temperatures reach into the 90's and winter ones fall to the 50's.

The population of over 1 million is primarily of Arab background and Islam is the official religion. The constitution puts executive power in the head of state, the Emir, a member of the Sabah dynasty founded in 1756; he appoints a Prime Minister who selects a cabinet. There is a 50-member national assembly elected by men over 21 who have a 10 year residency, except for policemen and servicemen; the majority of the population are non-Kuwaitis (including many Palestinians) and do not have a vote.

Oil is the country's economic mainstay; it provides a very high per capita income so that Kuwait has become one of the most advanced welfare states. All medical, social and educational services are provided free. Education is compulsory for the primary and intermediate levels; girls, as well as boys are encouraged to go into higher education.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ministry of Education

Department of Special Education

Ministry of Labor and Social Affairs

Ministry of Health

VOLUNTARY ORGANIZATIONS

Including mental retardation

Kuwait Society for the Handicapped
P.O. Box 21362, Kuwait

Founded in 1971 by public spirited citizens to assist the official agencies in providing services for severely handicapped children, the Society is a member of Rehabilitation International and the International League of Societies for the Mentally Handicapped.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Early case finding, consultation to parents, diagnosis and assessment and medical care - The Social Services Department of the Ministry of Education has a special bureau for diagnosis, referral and placement. Diagnosis and treatment in "special" cases is the responsibility of the Ministry of

Health, which provides physiotherapy in the major hospitals and attends to the medical needs of pupils and residents in specialized centers. The Kuwait Society for the Handicapped, through its center for severely multihandicapped children, publicizes its goals for the purpose of encouraging parents of such children to bring them for treatment; parents receive professional advice on handling their children and are encouraged to take them home for weekends and holidays.

Education, work training and financial assistance - Educational services are provided in the 11 Institutes for Special Education, which make up Kuwait's modern rehabilitation center serving the blind, deaf, physically handicapped and mildly retarded. These services, provided by the Department of Special Education, are on a day basis with residential facilities available for pupils from distant places or outside Kuwait, as well as those with special problems. Total enrollment in 1976 was 2,120, of whom 425 were mildly retarded.

The Ministry of Labor and Social Affairs is responsible for vocational training at the Institutes, for employment placement assistance, and for financial assistance for persons so severely handicapped that employment in the open community is difficult.

Residential care - The Ministry of Labor and Social Affairs is also responsible for services for moderately and severely retarded people, and in 1964 established a center which at present accomodates 250 residents (children and adults). Another center for multiply handicapped persons was founded in 1974. In both a close contact is maintained with families, including weekend and holiday visits.

The residential program of the Kuwait Society for the Handicapped serves about 100 severely physically and multiply handicapped children, and is intended to expand to serve 200 more. There is extensive involvement of volunteers, including young people in the services of the Society, but so far no parent group as such.

OTHER INFORMATION FOR VISITORS

Information may be obtained from the Kuwait Society for the Handicapped.

LEBANON

Note: At the time the revision of this Directory was in progress, the war and political situation in Lebanon was still so unsettled that it was not possible to secure new, definitive information. However, a report on Lebanon was presented to the First Regional Arab Conference on Mental Retardation held in Tunis, November 1975, organized by the International League of Societies for the Mentally Handicapped and the Tunisian Association for the Mentally Retarded. This report was prepared by Miss Lena Saleh, former Executive Secretary of the Lebanese Association, and is reprinted in full.

Lebanon's population, according to the estimates of 1973, was 3,060,000, with 44.8% under 15 years, and 40% of its population urban. The infant mortality rate is estimated at 59 per 1,000.

Education in Lebanon is not compulsory and the responsibility is shared by both the public and private sectors. Public primary education is free. Private education is not free and it attends to a high percentage of secondary and university education.

Public health services are spread, but heavy reliance is on the private sector. Social services are also to a large extent initiated and administered by private agencies, with partial government subsidy. The economy of Lebanon depends mostly on services and agriculture. In 1972 a comprehensive social security scheme was introduced for paid employees covering medical expenses, termination and maternity benefits.

The first special institution for the mentally retarded was founded in 1937 by private initiative, offering institutional (custodial) care for profoundly retarded people. In 1960, the first special school was founded, and in the following 15 years ten special centers were opened, all founded by private groups. Five of the centers are residential and the others are on a day basis. Six of the centers offer programs for mildly and moderately retarded children; three for severely retarded children; and only one vocational training center. There are no sheltered workshops or hostels. The number of people served in one center ranges from 15 in the smallest to 100 in the largest. 90% of the clients benefiting from the services are below the age of 16.

A government bureau, Office of Social Development, under the Ministry of Social Affairs is the responsible body for services for the mentally retarded, and this applies only to those centers receiving government subsidy. The Ministry of Education gives occasional grants to some special schools. The Ministry of Health pays for a number of children in the institution for the profoundly retarded.

In 1973 the Ministry of Labor and Social Affairs put out a special legislative act to form a National Commission for the Handicapped, attending to the coordination of programs and the development of services. However, up to 1975 no action was taken for the implementation of this act.

Diagnostic services are provided for by a government clinic with a team of specialists, also at the family service of the Lebanese Association for the Mentally Handicapped, and the mental retardation clinic of the American University Hospital. The diagnostic centers keep a registry of the clients.

Approximately 54 educators and supervisors are engaged in the existing services; six are specialized educators, the others having a varied background in social work, child care, or normal teaching. There are occasional in-service courses organized either by government or private initiative; there is no formal training course. Some educators go abroad for training. Voluntary help in the special centers is existant; however, its extensiveness varies from one center to the other, depending on need and policy of the center.

The Lebanese Association for the Mentally Handicapped was founded in 1964 and came to be recognized as an organization of public utility in 1973. Its services reach out to parents, special centers, recreational programs (camps, clubs), as well as a relatively well developed public education program. The Association issues a quarterly bulletin, Awladuna, and holds an annual week of information campaign on mental retardation.

There is no legislation to protect the rights of the mentally retarded.

Information can be requested from

The Lebanese Association for the Mentally Handicapped
Rue Mme Curie
Richani Building (near Kraytem Mosque)
Beirut

L I B Y A

The Libyan Arab Republic, located on the north central coast of Africa, has an area of 679,362 sq. miles and a population of about 2,530,000, of whom about 55% are below 15 years of age; about 46% of the population is concentrated on the coast near Tripoli (the capital) and Benghazi. The people's ethnic background is largely Arab and Berber, Arabic is spoken, and the official religion is Moslem. Since 1969 the government consists of a Revolutionary Council, headed by a President.

Petroleum and natural gas production are the major sources of income, with animal husbandry ranking second. Agriculture, primarily date growing, is only possible in the Mediterranean coastal region, scattered oases, and two northern hill areas, since the land is mainly covered by sandy plains. The climate is dry and given to hot, dusty, dry winds which can last for 1 to 4 days at a time, especially in Spring and Autumn.

Education is free and compulsory for 6 to 11 year olds. About 53% of men and 94% of women are illiterate, but this is hoped to be improved by 1980; approximately 13% of the total government expenditure goes to education. There are two universities, in Tripoli and in Benghazi, with more than 11,000 students. Social security benefits are provided the disabled, sick and aged; included in this are medical services under the National Social Security System of the Secretariat of Social Affairs, through its Public Social Security Institute (PSSI). Medical services are given also through the Secretariat of Health. In 1972, the government spent 12% of its budget on health. Interest in mental retardation began in the early 1970's, and in 1973 the Department of Rehabilitation was established in the Ministry of Health.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Secretariats (correspond to Ministries)

Secretariat of Health
Department of Rehabilitation
P.O. Box 2667, Tripoli

The Department is responsible for all retarded persons, regardless of degree of retardation or additional physical or behavioral handicaps.

Secretariat of Social Affairs
Tripoli

Secretariat of Education
Tripoli

Secretariat of Labor and Civil Service
Tripoli

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Some services are currently available for children. In 1976 the Secretariat of Education started a day school for retarded children in Tripoli, the first such school in Libya, providing education for 31 children. The teachers were trained in Egypt.

The Department of Rehabilitation operates two institutions for mentally retarded children, the Residential Center in Massa and the Beni Adam Hospital ("Suani") outside Tripoli. The former, established in 1970, serves 70 children from less than one year old through age 15, of all levels of retardation, with medical, social, psychiatric and occupational services.

Suani serves 326 children from ages 2 to 20, primarily severely and profoundly retarded, although some are mildly retarded with additional handicaps. They are grouped by age (2 to 5 years, 5 to 8 years, and 8 to 20 years). There are medical, educational and recreational services, physiotherapy, and vocational services at a sheltered workshop at the institution. The 240 personnel are government employees or employees by contract, in the fields of medicine, social work, education, with about 68 having professional education or some type of training; many received special education training in Egypt.

The Secretariat of Health also has a ward for mentally retarded children at the Gargarish Mental Hospital in Tripoli. The Rehabilitation Department of the Secretariat provides medical services to all the retarded, even to those whose families are covered by the PSSI.

Legislation has recently been proposed to develop more services for the retarded in the areas of education, rehabilitation, mental health and residential care. There is also an interest in meeting the need for more personnel by additional training abroad and through in-service training courses. There is also concern to improve early intervention services and to provide more day schools in the community. The Department of Rehabilitation has started an information campaign, including the use of newspaper articles, regarding the need for early treatment, education and training of retarded people.

OTHER INFORMATION FOR VISITORS

This can be asked from the Department of Rehabilitation.

School holiday periods - Winter: Approximately December 23 to January 3
Spring: One week late March or early April
Summer: Mid-June to mid-September

LUXEMBOURG

The Grand Duchy of Luxembourg, bounded by Germany, Belgium and France, has an area of 999 sq. miles and a population of 360,000 people; its capital is Luxembourg. The government consists of a Council of State, chosen for life, and an elected Chamber of Deputies with executive power delegated to a minister of state and a Cabinet. The national language is Luxembourgeois; the official languages are French and German, and almost all citizens are Roman Catholic. Farming of grain and potatoes is done, but the economy rests on the steel industry which employs 17% of the labor force and accounts for 45% of total industrial production and 65% of total exports.

Education is free and compulsory for 6 to 15 year olds and there is almost 100% literacy. Many state supported secondary schools have a small tuition charge, and technical and vocational schools are often private. Besides various institutes of higher education, there is the International University of Comparative Sciences.

The Ministry of Labor and Social Security and the National Labor Office contribute to the various pensions for employed persons and their families which include medical benefits; public health standards are high and patient costs low, due to government support. Family allowances are also provided for all 5-year residents with children, under the Family Allowances Fund; under this same Fund the government pays the entire costs of birth grants and supplementary allowances for handicapped persons of any age.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministère de l'Education Nationale Service de l'Education Différenciée 5, rue Large, Luxembourg	Ministry of National Education

VOLUNTARY ORGANIZATIONS

Ligue Luxembourgeoise pour le Secours à l'Enfance Mentalement ou Cérébralement Handicapé 138, Blvd. de la Pétrusse Luxembourg	Luxembourg League for the Aid of Mentally Handicapped Children

Founded in 1963, the League is a member of the International League of Societies for the Mentally Handicapped.

Assn. de Parents d'Enfants Mentalement Handicaps 8, rue du Nord Esch-sur-Alzette	Association of Parents of Mentally Handicapped Children

Founded in 1967, the Association inaugurated a hostel for adults, "Foyer de la Solidarite." It has an active youth group; and opens its vacation homes to families from other countries.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Mentally retarded children fall under the same compulsory education laws as normal children, and are educated in special classes in regular schools, in special private boarding schools, or in regular classrooms when access to special education is limited; the government pays for each of these placements.

In 1971, in cooperation with the Ministry of National Education, the Ligue Luxembourgeoise,the Institut Pédagogigue de Walferdange, and the International League of Societies for the Mentally Handicapped sponsored a regional conference on the training of special education personnel for moderately and severely retarded children, "La Formation du Personnel Pédagogique Intervenant Directement dans l'Éducation des Enfants Atteints d'Arriération Mentale Modérée et Sévère."

OTHER INFORMATION FOR VISITORS

Information may be obtained from the Ligue Luxembourgeoise pour le Secours à l'Enfance Mentalement ou Cérébralement Handicapé.

School holidays - July and August

MADAGASCAR

The Democratic Republic of Madagascar, independent from France since 1960, occupies the island of Madagascar in the West Indian Ocean off the southeast coast of Africa. It has an area of 203,035 square miles and a population of 7 million. The capital is Tananarive. Until 1975 the name was officially the Malagasy Republic; the present socialist/military government took office in 1975, following some years of severe unrest and instability, with periods of martial law.

The people of Madagascar are of many ethnic groups, including Malay, Arab and African. Malagasy and French are spoken, but coastal tribes speak their own distinct dialects. Religions include animism (50%), Catholicism (25%), Protestant (25%) and Islamic (9%). The economy is based on agriculture; Madagascar produces 80% of the world's supply of vanilla; coffee and cloves are also exported. There is a high rate of unemployment.

About half of all school age children attend school; three fourths of the children in primary education are served by the public school system. Only a selective number go on to secondary school and the University of Madagascar.

BRIEF NOTES

The parents association was started in 1972, hoping to initiate needed educational services for their children. These efforts have hindered by the lack of special teachers or therapists, and by the parents' inability to carry the expense of such a school. An existing center for physically handicapped and deaf mute children does not admit children who are also mentally handicapped.

The only service for retarded persons which has been available is residential care provided for some adults in the mental hospital, or in a psychiatric out-patient clinic.

The importance of work for all, including mentally and physically handicapped persons, is recognized by those responsible for vocational rehabilitation and sheltered work programs, but it has not been possible to provide training or employment to more than a few of the retarded adults who could benefit.

Requests for assistance have been directed to United Nations specialized agencies by A.A.P.E.H.M. In December 1976 UNESCO assigned Mr Youssef Karaoui (Tunisia) to a 3-month education consultancy mission (including teaching materials).

A.A.P.E.H.M. will respond to requests for information, but preferably letters should be written in French.

Association des amis et parents d'enfants handicapés mentaux de Madagascar
(A.A.P.E.H.M.)
"Les Orchidées Blanches"
Boîte Postale 3909
Tananarive

The Association of Parents and Friends of Mentally Handicapped Children of Madagascar

MALAYSIA

(WEST MALAYSIA)

The Federation of Malaysia, a constitutional monarchy in Southeast Asia, has an area of 127,316 sq. miles and an estimated population of 11,900,000. Established in 1963, it includes the 11 States of the southern Malay Peninsula (West Malaysia) and Sabah and Sarawak on the island of Borneo, 400 miles across the South China Sea (East Malaysia). Singapore separated from the Federation in 1965. The capital city of Kuala Lumpur, in the State of Selangor, has a metropolitan area population nearing 500,000. The government consists of a Paramount Ruler, Prime Minister, Cabinet, and a bicameral Legislature; the latter is partly appointed and partly elected.

The following report deals with West Malaysia which extends about 460 miles from north to south, and some 200 miles east to west. The population is over 8.5 million with 74% living in rural areas. There is a diversity of cultures and races, the principal ethnic groups being Malay, Chinese and Indian.

The economy is based on rubber, tin and agricultural products with an increasing industrial development, and the highest per capita income rate of any of the South Asian countries. A population growth rate of over 3% plus the Government's commitment to greater educational opportunities, is steadily increasing the requirement for educational facilities. Malay is the national language; Malay and English are official languages.

Education is free and compulsory for 6 years of primary school. Many people go on to secondary education (vocational or academic) and some to a pre-university and university education at the several technical and teachers' colleges or the three universities.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Ministry of Welfare Services
Jalan Ruanku Abdul Rahman
Kuala Lumpur

Ministry of Education
Kuala Lumpur

Ministry of Health
Kuala Lumpur

National planning or coordinating body - In a limited area, the Inter-Ministerial Working Committee for the Rehabilitation of Handicapped Persons (comprising representatives of the above Ministries and invited individuals prominent in the field of rehabilitation) serves this function. It meets periodically to discuss problems of rehabilitation, including planning and coordination of services for all types of handicapped persons.

VOLUNTARY ORGANIZATIONS

Primary concern in mental retardation
Citizen

Selangor Association for Retarded Children
(Persatuan Kanak 2 Chachat Akal, Selangor)
Jalan Abdul Samad
Kuala Lumpur

Established in 1964 by parents, social workers and citizen volunteers, this was the first organization to provide a day school for mentally retarded children, for many years held in the Tamil Methodist Church Hall, now in its own school built on grounds donated by the Government. It became a member of the International League of Societies for the Mentally Handicapped in 1966. Groups are starting also in other states.

Other organizations which include mental retardation

Malaysian Mental Health Association
Kuala Lumpur

Malaysian Council for Child Welfare
25-A Jalan Kampong Pandan
Kuala Lumpur

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Medical care, residential care and financial assistance - Services for mentally retarded persons are generally still new and fairly limited. Government services on a small scale were first made available when the Ministry of Welfare Services introduced in 1958 the Handicapped Persons Services Section which, among other functions, began to register on a voluntary basis handicapped persons in four broad categories - blind, deaf and hard of hearing, mentally retarded and orthopedically handicapped. A small unit was established in Johore Bahru for residential care for 40 retarded children, now more than doubled in capacity. Another small unit in Bedong was started for boys above age 14. The functions of the Ministry of Welfare Services in meeting problems of the retarded child include the provision of public assistance, residential care and limited education, including occupational and physical therapy. The Ministry of Health is responsible for care of severely retarded persons in two of its psychiatric hospitals.

Education and employment - There are a few special schools for retarded children in connection with ordinary schools, as in the city of Johore Bahru, and through the efforts of the Association for Retarded Children, more special schools are being established. The Selangor and Penang Associations run day centers which provide primary education and social training. The Perak Branch of the Malaysian Child Welfare Council operates a day and residential school, the School for Mentally Retarded Children in Kampong Kepayang, Ipoh. (Two classes for retarded children have been organized since 1973 by the Social Welfare Council of Sarawak in East Malaysia).

OTHER INFORMATION FOR VISITORS

The Ministry of Welfare Services can help to arrange a program for the professional visitor or group of visitors from abroad, and act as liaison with voluntary organizations providing services. Contact:

Assistant Director of Social Welfare
(Handicapped Persons Services)
Ministry of Welfare Services
Jalan Tauanku Abdul Rahman
Kuala Lumpur

School holidays - 1st term vacation - 2 weeks in April
- 2nd term vacation - 2 weeks in July and August
- 3rd term vacation - mid-November to January

MALTA

The Island of Malta, because of her position in the center of the Mediterranean, her deep natural harbors, healthy mild climate and close proximity to both Europe and North Africa, attracted many powerful nations to her shores from the earliest times. The Phoenicians, the Carthagenians, the Romans, the Arabs, the Normans, the Angevins, the Aragonese and the Castilians, the famous Order of St. John of Jerusalem, the French, and finally the British -- all in their turn ruled over the country up to as recently as 1964 when Malta became an independent State within the British Commonwealth of Nations. Malta has been a Republic since December 1974.

The civilizations of more recent times have all left their mark on the Island, or to be more exact, a small group of islands only 120 square miles in area but with a population of just over 320,000 which makes Malta the most thickly populated country in Europe. The official languages are Maltese and English, but other languages are also widely spoken. Leading industries are ship repairing, food and beverages, textiles, manufactured goods, machinery and tools, transport and tourism.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Education

'Auberge d'Aragon'
Valletta

Mr. Joseph Burlo, Special Education Officer
Mr. A. Zammit Montebello, Educational Psychologist, School Psychological Services
Department of Education
Valletta

Ministry of Health

Merchants Street
Valletta

Dr. J. Pullicino, Physician Superintendent
Mount Carmel Hospital
Attard

Ministry of Labor, Employment and Welfare

310 Republic Street
Valletta

Mr. J. Torpiano
Director of Social Services
310 Republic Street
Valletta

Mr. V. Darmanin
Director of Labor
Britannia Street
Valletta

Mr. C. Gatt, Secretary
Disablement Resettlement Advisory Committee
121 Britannia Street
Valletta

Coordination and planning - The National Council for the Handicapped coordinates the efforts and activities of private organizations concerned with mental and physical handicap and submits its recommendations to the Government Ministries concerned.

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation

Malta Welfare Society for the Mentally Handicapped (MWSMH)
Kennedy Memorial Clinic
17, Nursing Sisters Street
St. Julians

Prof. J. Balea, President
Mr. Salvino Tellus, Hon. Secretary

Organized in 1963, the MWSMH has over 400 members - parents, professionals and interested citizens. It maintains a registration and counseling service and a weekly day center. However, the Society's main efforts have been directed to providing information to the public and to encouraging public and private agencies and organizations to extend and improve their services to the mentally retarded.

The Society has also succeeded in bringing to Malta from time to time experts in mental retardation from several countries. It is a member of the International League of Societies for the Mentally Handicapped and the World Federation for Mental Health.

Other

Commission for the Sick
Malta Catholic Action
Monsignor M. Azzopardi, Director
"Villa Monsignor Gonzi" Residential Home for
the Handicapped
Tal-Provvidenza, Siggiewi

PUBLICATIONS

The bilingual journal published by the Malta Welfare Society for the Mentally Handicapped, Qawwi Qalbek, frequently includes professional articles on mental retardation and information for parents.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Since 1966 the Malta Welfare Society for the Mentally Handicapped has maintained the J. F. Kennedy Memorial Clinic, the first such service in Malta. Additional services are continually being developed by the health authorities.

Education - The Department of Education is responsible for organizing classes and special schools for mildly and moderately retarded children and young people (educationally sub-normal and severely sub-normal, according to British terminology).

Work-training and employment - Under the Ministry of Labor the legislation and facilities on behalf of disabled persons are extended to cover the mentally handicapped.

Financial assistance - Families with mentally handicapped children under 16 qualify for children's allowances and retarded persons over 16 years of age qualify for a state pension. Other forms of assistance are available under the National Assistance Act.

Medical care - Sickness assistance is available to households with mentally deficient persons, as is free supply of medicines.

Residential care - St. Vincent de Paule Hospital and Mt. Carmel Hospital provide a limited amount of residential care to profoundly retarded children and to the aged retarded. There are a number of private homes caring for handicapped persons. In 1968 the first home specializing in the care of the mentally retarded was opened under private (church) auspices.

Recreation - The Malta Welfare Society is able to provide a certain amount with voluntary aid.

Planning - All services are in the course of development. Legislation is in the course of preparation which will extend services and facilities available to the mentally retarded.

OTHER INFORMATION FOR VISITORS

For visits to hospitals and clinics contact:

Department of Health
Merchants Street
Valletta

For visits to special schools and training centers contact:

Department of Education
'Auberge d'Aragon'
Valletta

School holidays

Mid-Term - 1st, 2nd and 3rd of November
Christmas - 24th December to January 5th
Easter - Maundy Thursday to Ash Wednesday
Summer - mid-July to mid-September

MAURITIUS

Mauritius is a volcanic island (787 sq. miles) situated some 550 miles off the east coast of Madagascar, forming part of the Mascarenes Group. Its climate is semi-tropical.

The population of nearly 900,000 is multiracial; the majority are Indians of Hindu faith and Indian Muslims. The Creoles, of mixed European and African descent, are the next biggest community. They are mostly Roman Catholic as are the minority communities,Chinese and Franco-Mauritians. The population density is very high -- 1,107.6 per sq. mile. The official language is English, but French is extensively used and "creole," a vernacular derived from French, is the means of communication between the different ethnic groups.

The island, French from 1715 to 1810, British from 1810, became an independent member of the Commonwealth in 1968, with a parliamentary type of government. Mauritius is a member of the United Nations.

Mauritius is predominantly agricultural and lives mainly on the production of cane sugar, but other industries are developing rapidly, which give employment to a large number of young women. This is changing fundamentally the way of life of the Mauritian population. The country is at present faced with major problems such as overpopulation, unemployment, housing and education. 50% of the population is under 20, 35% under 15. The average life expectancy is 63 years. Literacy is high. Primary and secondary education are free and although not compulsory, 93% of primary school-age children are enrolled.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ministry of Education
Government House, Port Louis

Ministry of Health
Edith Cavell Street, Port Louis

Ministry of Social Security
Royal Road, Port Louis

Ministry for Employment
Government House, Port Louis

Planning - The Standing Committee for Rehabilitation of the Disabled, a sub-committee of the Mauritius Council of Social Service, which is a semi-official body, was created to coordinate the activities of organizations working for the disabled in Mauritius.

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Citizen

Association de Parents d'enfants Inadaptés
de l'Ile Maurice (APEIM)
39, rue de St. Paul, Phoenix
Tel. 6-4400

Association of Parents
of Retarded Children of
Mauritius

The Association, founded in 1970 by a group of parents of mentally retarded children, has been a member of the International League of Societies for the Mentally Handicapped since 1972.

Other organizations which include mental retardation

Mauritius Mental Health Association
Stanley, Rose Hill

Research - In the early 1970's, a medical research team came to Mauritius to examine about 2,000 3-year olds in "high risk" categories. APEIM did door to door visits in the suburbs of Curepipe and Vacoas in 1970 to locate persons in need of services, and sponsored two surveys, in 1971 in Quatre Bornes, and in 1972 in Port Louis. The published report is: "Eléments d'une enquête sur la débilité mentale a l'ile maurice" ("Basic Findings of an Inquiry into Mental Deficiency in Mauritius.")

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - The first cases registered were found by APEIM as described above. At present referrals are made by hospitals, private practitioners, teachers and families to APEIM and the Mental Health Association. At APEIM, diagnosis is made by a pediatrician, with possible referral to a psychiatrist, psychologist, hospital or other professional or facility. APEIM does public information programs through television and newspapers, and also provides counseling, training and information for parents; one program includes remedial play groups with parents actively involved under the guidance of an occupational therapist and physiotherapist. There is also a program of home visits and basic home medical care, when necessary, to 125 severely retarded people, carried out by volunteers with the help of an occupational therapist.

Education - There are, as yet, no state special schools or special classes in ordinary primary schools. Some pre-primary education is being developed by voluntary agencies. Special education is limited to two schools created by the two voluntary associations: the Mental Health Association's school at Rose Hill is for mildly retarded children and was started in 1973; APEIM's school was opened in 1971 at Vacoas but has now moved to St. Paul Road, Phoenix in a building purchased by APEIM. The school now serves 50 moderately to severely retarded 5 to 25 year olds, separated into four groups. As soon as the older pupils move into the new workshop building which will be completed by the end of 1977, room will be available for 20 more young children from the waiting list. The school program was organized by a child care specialist lent by the French Ministry for Cooperation, who also trains the Mauritian teachers working in the school. The staff includes a speech therapist and an occupational therapist.

Work training and employment - The workshop section of the APEIM school trains boys in woodwork, packaging and gardening. Sub-contract work is also available. Girls are trained in household work, sewing, weaving and artistic crafts.

Medical care - is provided by the doctor attached to APEIM who refers to hospital or voluntary aid from specialists, if necessary. Vaccination and X-ray chest examinations are done each year at the center by the mobile services of the Ministry of Health.

Residential care - Most mentally retarded persons live with their families. Some, especially adults, live in asylums or the Brown Sequard Psychiatric Hospital. Good residential facilities for homeless mentally retarded persons are badly needed.

Recreation - The APEIM program includes sports and outdoor games and outings at the seaside, with sports day being a big event of the year. A Yoga club, where many pupils of the school are grouped with normal children is a great success.

Financial assistance - The government gives small yearly grants to the schools serving mentally retarded children. All other money comes from private sources (e.g. flag days, sales of greeting cards, private donations). APEIM has a network of "Friend Members" who contribute financially, and the Church World Service through the Mauritius Council of Social Service financed equipment for conference, consultation and speech therapy rooms in APEIM's school.

Personnel training - There is presently no state course for the training of personnel. In 1975 APEIM started a 2-year evening course for training of personnel, including those already working in the school. Lectures are given by local specialists. By 1978 this is to be accredited by the Institute of Education. One teacher is presently taking a 3-year specialized course in France on a scholarship from the French government.

Planning - Following a request from the Standing Committee for Rehabilitation of the Disabled of the Mauritius Council of Social Services, two experts from the United Nations Development Planning and the International Labor Organization visited Mauritius in 1975 and 1976 to advise the government on rehabilitation of the disabled and vocational training. A plan has been submitted to the government for approval.

OTHER INFORMATION FOR VISITORS

Information and assistance in planning visits can be obtained from APEIM or the Mauritius Council of Social Service (Edith Cavell Street, Port Louis).

School holiday periods - Winter: from mid-July to 1st week in September;

Summer: from mid-November to around January 7th; and a fortnight at Easter.

MEXICO

With a territorial area of 761,604 sq. miles, Mexico is the second most populous nation in Latin America and the third largest in size. It is a federal democratic republic of thirty one states, bordered on the north by the United States of America, on the east by the Gulf of Mexico and the Caribbean Sea, and on the southeast by the Pacific Ocean. It has a population of 60,150,000 and the Federal District, with the capital Mexico City, over 8.5 million. The official language is Spanish, although some indigenous groups (about 1 million) speak various Indian languages, descended from the pre-conquistador Mayan, Toltec and Aztec civilizations.

The President is elected for a six-year, single term of office. He governs together with a parliament and a judiciary, under a political constitution.

Education is compulsory up to 15 years of age. The educational system has had a great increase in the last decades, and the literacy rate is 65%. The social security system, which includes extensive health care including its own hospitals, has also been increasing enormously. Life expectancy is relatively high (61 years). The general development of Mexico in the last 20 years has been notable. Services for the mentally retarded, however, which had been developing consistently during the 1960's, seem to have reached a plateau in the 1970's. Rehabilitation services for the physically handicapped are quite well developed.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Secretaria de Salubridad Reforma y Lieja Núm. 7 México, D.F.	Secretariat of Health
Dirección de Salud Mental	Department of Mental Health
Dirección de Rehabilitación	Department of Rehabilitation
Hospital Infantil "IMAN" (Instituto Mexicano de Asistencia Niños) Ave. Universidad 1810 Mexico 20, D.F.	
Secretaria de Educación Publica Argentina y González Obregón México 1, D.F.	Secretariat of Public Education
Dirección General de Educación Especial Campos Elíseos y Bernard Shaw México 5, D.F.	Department of Special Education

Undersecretariat of Youth, Recreation and Sport
Center of Psychopedagogic Investigations of Special Education
Alejandro Dumas No. 123
Col. Polanco, Mexico 5, D.F.

Secretaria de Gobernación Bucareli 99, México D.F.	Secretariat of State
Departamento de Prevención Social Tacuba 8, México 1, D.F.	Department of Social Insurance
Tribunal para Menors Obrero Mundial Núm. 76, México D.F.	Youth Protection Service
Secretaria de Trabajo y Bienstar Social	Secretariat of Labor and Social Welfare
Instituto Mexicano del Seguro Social Av. Paseo de la Reforma Núm. 426 México, D.F.	Social Insurance Institute
Instituto Nacional de Protección a la Infancia Av. Emiliano Zapata 320, México, D.F.	National Institute of Child Welfare
Escuela Normal de Especialización Campos Elíseos y Bernard Shaw México 5, D.F.	Special Education Teacher Training College
Instituto Médico Pedagógico Arteaga Núm. 35 Villa A. Obregon, México, D.F.	Medico-Pedagogical Institute

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation
Professional

Sociedad Mexicana para el Estudio Científico de la Deficiencia Mental Presidente: Dr. Guillermo Coronado Extremadura 28 México 19, D.F.	Mexican Association for the Scientific Study of Mental Deficiency

Organized in 1966, it is affiliated with the International Association for the Scientific Study of Mental Deficiency and the Iberolatin-American Group on Mental Retardation. In 1975, the Sociedad organized the 2nd Congreso Iberolatino-Americano sobre Deficiencia Mental in Mexico City.

Citizen

Although there are many voluntary groups of parents and interested professionals which support special school programs, a national organization has not been established. Among those active in Mexico City are:

Asociación Mexicana Pro-Nino Retardado Mental
(Day school - "Guardería Especializada Núm. 1")
Av. Tacubaya 560, México 11, D.F.

Asociación Civil de Padres de Familia pro Centro de Terapia Educativa
Institución para Rehabilitación de Niños Mogoles (Syndrome de Down)
Aptdo. Postal 44-066, México 12, D.F.

PUBLICATIONS

Boletín de Pediatría y Deficencia Mental
Av. Extremadura 28
México 19, D.F.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - is carried out by the hospital services, in departments of pediatrics, psychiatry and neurology. General practitioners, in general, still lack information on mental retardation, and multidisciplinary training of other medical professions and of psychologists and teachers has not been well developed.

Education - Throughout the country the special schools are concentrated in the more densely populated areas. The majority of existing government schools accept only mildly, and some moderately retarded children. About half of the 50 or 60 existing special schools are supported fully or in part by the government; the rest are private, non-profit or proprietary.

Work training and employment - In the public schools in Mexico City, vocational training workshops operate after the regular school hours. The National Secretariat of Health is responsible for the Escuela "Bernardinto Alvarez" para Adolescentes Deficientes Mentales (Insurgentes Sur 3877, Mexico City), directed by Prof. Ignacio M. del Castillo, provides vocational training for boys and young men. In 1970 a training and work center for men over 16 years of age was started under the auspices of the Department of Special Education, directed by Profa. Florentina González Cipres:

Industrias Protegidas No. 1
Rio Churubusco, Arboleda y Sur 81
Colonia Ampliación Sinatel
México, D.F.

Medical services - The Mexican Social Insurance Institute operates its own hospitals, clinics, pharmacies and other medical facilities, through regional and local boards. Services for non-insured workers and their families are provided by the parallel Health Department system or private physicians; government employees are covered by their own health insurance system.

Residential care - This is provided in wards of psychiatric hospitals or in private institutions.

Research - While research in the field of mental retardation is still very limited, the important work being done at the Hospital Infantil (IMAN) in the relationship of nutrition to mental retardation is internationally known. The recently opened Center of Psychopedagogic Investigations in Special Education, under the Secretariat of Public Education, is the first center of its kind in Mexico. Directed by Profa. Odalmira Mayagoitia de Toulet, it is intended to develop better methods, techniques and instruments of diagnosis and psychopedagogic treatment for children with special needs who are retarded, have learning difficulties, sensory or perceptual problems, or superior intelligence.

Personnel training - Systematic training of teaching personnel is provided by the Escuela Normal de Especialización and some other organizations. Over the years numerous teachers from the Central American states have been trained in Mexico.

OTHER INFORMATION FOR VISITORS

Information and assistance with visits can be requested from

Sociedad Mexicana para el Estudio Científico de la Deficiencia Mental
Presidente: Dr. Guillermo Coronado
Av. Extremadura 28
México 19, D.F.

MOROCCO

Morocco, with its capital at Rabat, is located on the northwest coast of Africa, bordering on the Atlantic Ocean and Mediterranean Sea. The population is 17.7 million, and it occupies 172,414 square miles. The people are mainly of Berber-Arabic descent, of the Sunni Moslem religion, and speak Arabic (the official language), French and Spanish. The topography consists of plains in the southwest and on the Atlantic coast, Mediterranean coastal and inland mountains, a central plateau, and a pre-Saharan area extending south to east. The economy depends mainly upon agriculture (grains and fruit), but manufacturing (leather goods) and mining, especially of phosphate, are also increasingly important.

A French protectorate from 1912 to 1956, Morocco is a constitutional monarchy governed by the King, H.M. Hassan II; a unicameral legislature is being planned. Primary public education is free and compulsory for 7 to 13 year olds, but is not attended by all children; there are some private schools as well. Although their strong religious orientation tends to give Moroccans an attitude of patient acceptance of one's fate, the desire to have one's son receive an education is strong even in very disadvantaged families and there has been strong emphasis on increase of school opportunities. There are secondary, trade and agricultural schools, teacher training and other schools of higher education, and a university. Medical and social services are provided by the public and private sector, and sometimes by the Department of Social Security. Certain employees can subscribe to the National Fund for free health care and other benefits.

GOVERNMENTAL AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministère de la Santé Publique Square Poeymirau, Rabat	Ministry of Public Health
Ministère de la Jeunesse et des Sports Rabat	Ministry of Youth and Sports
Ministère due Travail et de la Sécurité Sociale Rabat	Ministry of Labor and Social Security
La Caisse Nationale des Organismes de Prévoyance Social B.P. 209, Rabat R.P.	National Social Security Fund
La Mutuelle Général du Personnel des Administration Publiques au Maroc B.P. Rabat - Chellah 540	General Mutual Fund of Public Administrative Personnel in Morocco

These insurance systems are under supervision of the Ministry of Labor and Social Security.

VOLUNTARY ORGANIZATIONS

Association de Parents et Amis
d'Enfants Inadaptés du Maroc
c/o Délégation Préfectorale
21, Charia Al Alaouiyne, Rabat

Moroccan Association of Parents
and Friends of Mentally Retarded Children

Founded in 1968, this association seeks through its several branches to create an awareness in both citizens and the government about mentally handicapped persons' needs, as well as to give financial, technical, and other support to services for the retarded (including a French/Arabic documentation center for parents and workers). It became a member of the International League of Societies for the Mentally Handicapped in 1972.

OTHER ORGANIZATIONS

Ligue Marocaine de Protection
de l'Enfance et d'Education
Sanitaire
Immeuble de la Santé Publique
Square Poeymirau, Rabat

Moroccan League for Child Welfare and Health Education
(Member, International Union
for Child Welfare)

This is a well established child welfare organization which has initiated various maternal and child care services, among them pre-school and day care centers for disadvantaged and orphan children, including some physically and mentally handicapped children. Since 1961 the League has been providing personnel training, based mainly on the methods of Montessori and Decroly.

BRIEF NOTES

It is estimated that about half of the children considered mildly retarded (debiles legers) are receiving special education in "classes de perfectionnement" in the regular school system. Education for other retarded children has been available only in the last decade; there are now at least 6 non-profit special schools (centres de re-education) in Rabat and Casablanca, serving 5 to 18 year olds who are mostly moderately (but sometimes severely) retarded. One of these is a residential school, while the rest are day schools. They offer pre-vocational training as well as education, and also services to the family. Children are referred by private physicians; those whose families belong to the National Fund receive special diagnostic screening before they are admitted and the Fund covers up to 90% of the costs of schooling. Children of non-Fund members are admitted on a sliding scale fee basis.

The Association of Parents and Friends of Retarded Children has been active in establishing and funding the centers, providing technical assistance for their operation, summer camp programs, and consultation to parents. An example of such assistance is the Amal School (School of Hope), the Centre de Re-education Psycho-Pedagogique, near Rabat.

Because of the lack of specialized personnel, staffing has often been filled by non-Moroccans, with in-service training for auxiliary staff. The Ministry of Youth is concerned with training and some scholarships have been made available by the Mutual Fund for training abroad of specialized professional workers; this is generally in France, which has a close relationship between its National Association, U.N.A.P.E.I., and the Moroccan Parents' Association.

OTHER INFORMATION FOR VISITORS

This can be obtained from:

Association de Parents et Amis d'Enfants Inadaptes du Maroc
c/o Délégation Préfectorale
21, Charia Al Alaouiyne
Rabat

School holiday periods - Most of the centers are closed during August. There are also many religious holidays throughout the year, the most important of which is Ramadan, in February/March.

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THE NETHERLANDS

Area - 15,800 square miles; population - 13.8 million. One of the world's most densely populated countries, the Kingdom of the Netherlands is a constitutional monarchy with a bicameral parliament, the States General. There are 11 provinces; the language is Dutch and the population is quite homogeneous except for some thousands of persons who chose to immigrate from Indonesia and Surinam when these countries became independent. In the religious sphere, of much import in the fields of health, welfare and education, there is a rather firm grouping between Roman Catholics (about 40%), Protestant (about 33.7%) and non-church affiliated persons (about 23.6%). This is reflected in the fact that human welfare services are usually rendered by Catholic, Protestant and non-denominational agencies providing parallel services.

The Netherlands' economy rests on agriculture, horticulture, shipping, and a rapidly growing industry, providing nearly full employment, a factor which was of significance in the development of sheltered workshops and other rehabilitative services during the 1960's.

Social and health measures are well established and operate under a system which relies on a tripartite (Catholic, Protestant, non-denominational) system of agencies which receive subventions from the appropriate public bodies. The Dutch have pioneered in establishment of efficient community psychiatry services, variously provided by government and voluntary agencies, and in the mental health field have more than 30 national organizations. Specialized organizations of the various professional and voluntary workers in other health, welfare and education areas are similarly numerous.

Education is compulsory from ages 6 through 15. Special education has long been a part of the Dutch public school system, schools for the moderately and severely retarded having been a part of the official system since 1950, and schools for the mildly retarded since the 1920's. Residential homes and schools under private auspices have existed since the turn of the century, but the 1960's saw an extensive and differentiated development of services, for retarded adults as well as children.

In the listing which follows it is impossible to indicate all the various relationships within and between national, provincial and municipal governmental agencies and the voluntary non-profit organizations, relationships which relate to financial subsidies and standard setting, consultation and encouragement of preventive measures, legislative action, etc., in regard to the responsibilities of the different Ministries and their administrative agencies. The care for the mentally retarded is a shared responsibility of the government and of private organizations. However, provision of care is almost totally in the hands of the many private, non-profit organizations and agencies, while the government, through financial, regulatory, advisory and planning measures, makes the policy, in close cooperation with the private organizations and agencies.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministerie van Volksgezondheid en Milieuhygiene	Ministry of Public Health and Environmental Hygiene
Geneeskundige Inspectie voor de Geestelijke Volksgesondheid Dokter Reijersstraat 8 Leidschendam (near The Hague)	Medical Inspection for Mental Health Services

Responsibilities relate both to provision of residential care (primarily administered by voluntary organizations) and to the social psychiatric services (community mental health services) for the mentally ill and retarded, child guidance clinics and consultation bureaus for babies and toddlers.

Provincial or local public health agencies more or less active in mental retardation and not dependent on ministries are advisory bodies in matters of public health and the agencies for direct care:

Provinciale Raden voor de Volksgezondheid	Provincial Councils for Health
Gemeentelijke Geneeskundige en Gezondheidsdiensten	Municipal Health Services in city areas
Stichtingen voor de Geestelijke Volksgezondheid	Provincial Mental Health Organizations in rural areas
Ministerie van Onderwijs en Wetenschappen Nieuwe Uitleg 1, 's-Gravenhage (The Hague)	Ministry of Education and Science
Hoofdinspectie voor Buitengewoon Lager Onderwijs Oorsprongpark 4, Utrecht	Chief Inspectorate for Special Education - "B.L.O."

Responsible for special education and scientific research at university level. Both agencies are concerned with the education programs in day and residential schools: the responsibility of the Ministry is primarily legislative, while the Inspectorate is the controlling, but also stimulating body and not directly a part of the Ministry.

Ministerie van Sociale Zaken Zeestraat 73, 's-Gravenhage (The Hague)	Ministry for Social Affairs
Afdeling Complementaire Sociale Voorzieningen	Department for Social Employment

Responsible for social employment and sheltered workshop provision; relates to subsidies and regulations for the GSW program (Municipal Social Employment), originally for the unemployed, now for all handicapped workers in need of special provisions.

Ministerie van Cultuur, Recreatie en Maatschappelijk Werk	Ministry of Culture, Recreation and Social Welfare
Directie Maatschappelijke Dienstverlening Afdeling Sociale Revalidatie Steenvoordelaan 370 Rijswijk (near The Hague)	Department of Social Services Subdepartment of Social Rehabilitation

Responsible for specialized social services for the retarded (social-pedagogic services) and supervision of extramural care; day centers for children and adults, boarding homes and hostels, short-stay and recreation facilities.

Ministerie van Justitie Plein 2b, 's Gravenhage (The Hague)	Ministry of Justice

To this Ministry belongs the responsibility for child protection (Kinderbescherming) and supervision of institutions and homes some of which include mildly retarded young people.

National planning and coordination - On the governmental level an interdepartmental Steering Committee on Rehabilitation Policy was established in 1971 but has only been activated in 1976. Since 1964 a national coordinating body has united the various professional and consumer (parent-sponsored) organizations, with representation from the concerned government agencies:

Nationaal Orgaan Zwakzinnigenzorg (NOZ) Vinkenburgstraat 26, Postbus 415, Utrecht	National Association for the Care of the Mentally Retarded

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation

Professional

Nederlands Genootschap ter Bestudering van de Zwakzinnigheid Vinkenburgstraat 26, Postbus 415, Utrecht	Dutch Society for the Study of Mental Deficiency

Established in 1964, it is affiliated with the International Association for the Scientific Study of Mental Deficiency and was a co-host to the third Congress, in 1973 in The Hague.

Overlegorgaan van Zwakzinnigeninrichtingen in Nederland Badhuisweg 72, 's-Gravenhage	Association for Intramural Care for the Mentally Retarded

Unites the national Roman Catholic, Protestant and "general" (non-denominational) organizations providing residential care.

Stichting Federatie Sociaal Pedagogische Zorg voor Zwakzinnigen (SPZ) Laan van Meerdervoort 323, Postbus 6251 's-Gravenhage	Federation of Social-pedagogic Care Agencies for the Mentally Retarded

Unites the 3 national associations working in this area and holds membership in the International League of Societies for the Mentally Handicapped.

These unique, specialized social work organizations are:

Nederlandse Vereniging voor Sociaal-Pedagogische Zorg, Postbus 6251, 's-Gravenhage

Protestants-Christelijke Vereniging tot Bevordering van Sociale en Pedagogische Zorg, Dillenburgstraat 33, Utrecht

Katholieke Landelijke Vereniging voor Sociaal Pedagogische Zorg van de H. Josef van Cupertino, Koningsweg 47f, 's-Hertogenbosch

Citizen

Stichting Federatie van Ouderverenigingen van Geestelijk Gehandicapten
Timmermanslaan 2, Postbus 103
Maarssen (near Utrecht)

Federation of Parents Associations for the Mentally Handicapped

Unites the 2 national parents' associations:

Vereniging van Ouders van Geestelijk Gehandicapten
Timmermanslaan 2, Maarssen

Established in 1976 by a union of:

Helpt Elkander (general - 1954)
Voor het Zorgenkind (Roman Catholic - 1957)

Philadelphia (Protestant - 1957)
Dillenburgstraat 33, Utrecht

Through the Federation they are members of the International League of Societies for the Mentally Handicapped. They receive government subsidy and over the years have stimulated action in all program areas, especially with regard to social security, recreation and provision of group homes (tehuisen) in the community, as well as providing mutual support to their members and information to the public.

Other organizations which include mental retardation

Overlegcentrum Buitengewoon Onderwijs van de Algemene Nederlandse Onderwijzers Federatie
Herengracht 56, Amsterdam

Association of Special Education Teachers

Covers the 3 national special education organizations. Also a member is the "general" agency for social work for the mentally retarded, Nederlandse Vereniging voor Sociaal-Pedagogische Zorg.

Inter-Federatief Overleg Beschuttende Werkplaatsen (IFO) Reinoudsingel 80, Venlo	National Association for Sheltered Workshops

All the foregoing voluntary organizations joined together in 1964 in the NOZ:

Nationaal Orgaan Zwakzinningenzorg Vinkenburgstraat 26, Postbus 415 Utrecht	National Association for the Care of the Mentally Retarded

in which the 4 main ministries dealing with mental retardation are represented. The NOZ has been sponsored from the beginning by the 2 national coordinating organizations in the field of mental health and social welfare:

Nationale Centrum voor Geestelijke Volksgezondheid 26, Wilhelminapark, Utrecht	National Center for Mental Health
Nationale Raad voor Maatschappelijk Welzijn Stadhouderslaan 146, 's-Gravenhage	National Council for Social Welfare

As pointed out in the introductory paragraphs, because of the multitude of organizations active in providing or stimulating services for the mentally retarded in some way, it is not feasible to give a more complete listing. Such a listing would include special commissions and foundations, additional organizations of professional and voluntary workers on various levels in the fields of health, education, social welfare, employment and recreation.

RESEARCH

Research is being carried on by universities and institutions. Information can be given by the Bishop Bekkers Institute (Postbus 416, Utrecht) founded in 1972 by the NOZ, the Dutch Society for the Study of Mental Deficiency and the Bishop Bekkers Foundation. Its purpose is to stimulate research, provide information, and promote contacts between various study and research bodies.

PUBLICATIONS

KLIK - Maandblad voor de Zwakzinnigenzorg, NOZ Postbus 415, Utrecht	Published monthly by NOZ, giving general information on the whole field, especially on actual developments.
Tijdschrift voor zwakzinnigheid en zwakzinnigenzorg Henric Spieghelstraat 2 's-Hertogenbosch	Quarterly journal on mental retardation and care of the mentally retarded with scientific orientation, published by Samivoz, a Roman Catholic facilities group.
RUIT Bishop Bekkers Institute Postbus 415, Utrecht	Information and news bulletin on research and research management.

Journals are published by the National Association for Sheltered Workshops, by the Social Pedagogic Care Associations and by the National Parents's Associations (Raakpunt and Philadelphia) as well as the 3 national special education associations (Tijdschriften voor Orthopedagogiek, C.B.O. and R.K.B.O.), and by numerous other organizations directly or indirectly related to the field of mental retardation.

A monthly annotated bibliography of books and journal articles regularly including mental retardation references is prepared by the Central Bureau of the coordinating child welfare organization Werkverbund Integratie Jeugdwelzijnswerk Nederland (Van Vollenhoven 659, Postbus 3101, Utrecht).

REAP - an international journal in English with summaries in French and German on Research Exchange and Practice in Mental Retardation. Published quarterly by Swets and Zeitlingen B.V. Amsterdam.

Editors: Annalise Dupont, Denmark; H.C. Gunzburg, U.K.; C.G.A. de Jong, The Netherlands. Coordinating Editor: Sándor Németh, Bishop Bekkers Institute.

Directories:

Gids voor de Geestelijke Gezondheidszorg
Edited by the library service of the National Center for Mental Health.

Guides for Mental Health Services

In 2 volumes: Part I contains information on organizational and financial aspects; Part II is an annotated listing of available facilities and services, including schools, residential, employment, counselling and recreational services for the mentally retarded.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Case finding (early detection facilitating early treatment) is best available in the larger cities through consultation and health centers. Efforts in the past years have improved and extended throughout this country. Diagnostic services are available through the social-psychiatry clinics and the social-pedagogic centers. Both also provide consultation to parents and to the retarded youth and adult. Some areas have special out-patient clinics for mentally handicapped children.

Education - The Netherlands has pioneered in developing free, specialized education under public auspices; for the mildly retarded (debiles) and children with borderline intelligence this covers ages 7-16, and for the moderately and severely retarded (imbeciles) ages 6-19. As with ordinary primary education, the schools are organized by either municipal or private organizations. The "debile scholen" and the "imbecile scholen" constitute a separate system and are usually in different buildings. (The Bouwcentrum, an architectural planning center, has issued special publications on designs for these 2 types of schools - Weena 700, Postbus 299, Rotterdam 3.) There are no special classes for the mentally retarded in the regular schools with the exception of a few for mildly retarded adolescents in secondary vocational schools. While school attendance is compulsory, parents have the right to reject the type of school recommended and to insist that their child, though retarded, attend normal school. However, it is estimated that over 95% of the children needing special education are receiving it.

Special education in The Netherlands has 14 categories of schools but the 2 serving the mentally retarded accomodate 75% of the total special education enrollment and about 2% of the school population ages 6-16 (in more than 300 day and boarding schools).

Work training and employment - As in special education, the Dutch have also pioneered in providing large industrial type sheltered workshops related to a system of community hostels. During the long period of full employment in the country mildly retarded young people easily found employment in industry or commerce, or else were placed through the social-pedagogical service. Workshops (which often serve a mixed clientele of handicapped persons) accepted severely and even profoundly retarded persons at a time when other countries had hardly begun to serve the moderately retarded.

Legislation which took effect in 1969 mandated all municipalities to create work opportunities, within or without workshops, for handicapped individuals. However it also provided for the creation of day centers for adults not able to work regularly, which has resulted in exclusion from the sheltered workshops of persons with low production. Since 1949 mentally retarded persons in sheltered employment have received wages and since 1964 enjoyed the same social benefits as employees in open industry.

Medical care - As in so many other countries, during the past decades the medical profession in general has shown a growing interest in the problems of mental deficiency. In addition to the broad general programs of medical care, legislation which took effect in 1968 provides a special insurance scheme for severe medical risks and has provided substantial relief to the families of severely and profoundly mentally retarded children and adults. The law is broadly written and includes care, along with therapy.

Residential care - In 1974 there were 134 residential institutions serving 23,326 mentally retarded persons (not including several thousand in general psychiatric institutions). In 1963 there were only 33 institutions, serving 11,200 persons. A few institutions have 1,000 or more residents, but in general residential facilities are small and of high quality. While there is a strong tradition for wide use of residential care, more recently there has been active interest in the development of stronger community services, and the number of hostels for adults has increased rapidly.

Financial assistance - Most of the services rendered to the mentally retarded are free, but for some a small contribution is required which, in case of need, can be paid by the local authorities. Reference has already been made to the most important new medical insurance scheme and its advantage to the families of the mentally retarded, and to the wage payments earned by workers in sheltered employment as well as their rights to social insurance.

Recreational programs - are to a considerable extent provided by the parents' associations. Holiday homes and camps have been particularly successful. The social-pedagogues, responsible for social adjustment of the mentally retarded, are very much concerned with organized leisure time activities, particularly for the older adolescents and adults. Judo and other sports are promoted by the Nederlandse Sportbond voor Geestelijk Gehandicapten (Koniginnegracht 101, 's-Gravenhage).

Research - is being conducted under private auspices, universities and residential institutions with financial support from the government. The Dutch Society for the Scientific Study of Mental Deficiency is concerned with promotion and coordination of research projects, and particularly in stimulating multi-disciplinary clinical and field research, and was instrumental in starting the Bishop Bekkers Institute described above.

Personnel training - Teachers of the mentally retarded must have the general primary teacher certificate plus a year of special courses. Care personnel for residential services receive 3 years in-service training culminating in an examination leading to a diploma. Social workers, called social pedagogues (originally these were teachers concerned with after-care) receive 2 1/2 years of specialized training (including 1 year in-service) following their general social work diploma. Pedagogical assistants, working in community based day care facilities receive theory and practice in-service training over a 2-year period and may take a 9-month intensive course to qualify as head of a facility.

Planning and coordination - Since 1964 the NOZ has brought together under one roof the private organizations to work toward improvement of cooperation, and of services, through discussion, study and pressure on the authorities. Representatives of the concerned ministries serve as consultants. However, the lack of a coordinated official policy on the handicapped, as well as the wide diversification of the legislative provisions, are seen as areas in particular need of study and action. Other specific planning goals lie in the area of early detection, the regulation of legal rights of mentally retarded persons, and action needed to move toward more integrated services.

OTHER INFORMATION FOR VISITORS

Requests for information and assistance in arranging professional visits can be directed to the International Relations Departments of the Ministries noted above and to the voluntary organizations.

School holidays - The holiday period of the special schools occurs during the months of July and August.

NEW ZEALAND

Area - 103,736 square miles, lying 1,400 miles south-east of Australia; including all the islands within its administrative orbit, New Zealand reaches from the tropics to the Antarctic but most of its population lives in the North and South Islands. Its scenic mountains and fiords, thermal areas and long beaches attract 100,000 visitors annually. The climate is temperate.

Population - 3 million of whom 90% are of British origin, 8% Maori and 2% other races. The Maoris are of Polynesian origin having migrated to New Zealand between the 10th and 14th centuries. They have had full citizenship since 1840 and equality with persons of European descent. Intermarriage is resulting in an increase in the number of citizens with a Maori ancestry and a sharp decrease in those who are fully Maori.

Government - New Zealand was a British colony from 1840 when large scale migration from Britain was organized. Self-government was granted in 1852 and New Zealand is now an independent member of the British Commonwealth with a unicameral parliament, the House of Representatives. Of the 84 members of Parliament, four are specifically elected to represent the Maori people.

Social services - Social legislation was considerable by 1900. Education has been free and compulsory for all children over 5 years since the 1880's. The current social security and medical care provisions date initially from 1938. Most social services in New Zealand are provided by the State without cost to the user.

Services for the mentally retarded in New Zealand followed the pattern set by Great Britain and at mid-century were largely limited to a few public school classes for the mildly retarded (known then as "mentally backward") and closed institutions (known as "psychopaedic hospitals" or "hospitals and training schools") for those retarded persons whose removal from the community appeared necessary.

A major shift occurred in 1949 with the founding of the Intellectually Handicapped Children's Parents Association, later changed in name to the Intellectually Handicapped Children's Society of New Zealand, now the New Zealand Society for the Intellectually Handicapped (since 1975). The Society has stimulated a revolution in public thinking, professional attitudes and government policy and has pioneered a variety of community services. It has 28 branches and approximately 2,000 parent members, and operates hostels, small community homes, day care and pre-school centres and workshops. The New Zealand Society for the Intellectually Handicapped has been a member of the International League of Societies for the Mentally Handicapped since 1965.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Department of Health	
Dr. S.W.P. Mirams, Director Division of Mental Health P.O. Box 5013, Wellington	Responsibility for supervision of regional and local Hospital Boards operating the larger special institutions or psychopaedic hospitals.

Ministry of Works Vogel Building Aitken Street, Wellington	Responsibility for approval of plans and design of buildings when Government subsidy is paid to the NZSIH.
Department of Education Mr. David Ross, Officer in Charge of Special Education Government Buildings Wellington	Responsibility for education of all children including educable intellectually handicapped from 5-16 years.
Department of Social Welfare Director General Bowen Street, Wellington	Responsible for welfare benefits and community services for day care accommodation and work opportunity of the intellectually handicapped.

VOLUNTARY ORGANIZATIONS

Professional

The Scientific Council of the New Zealand Society for the Intellectually Handicapped
P.O. Box 1063, Wellington

Citizen

New Zealand Society for the Intellectually Handicapped
Mr. R. G. Mathews, General Secretary
P.O. Box 1063, Wellington

RESEARCH

The Research Foundation of the New Zealand Society for the Intellectually Handicapped
Mr. R. G. Mathews, Secretary
P.O. Box 1063, Wellington

Human Genetic Research Unit
Department of Human Genetics and Community Medicine
Auckland Medical School
Private Bag. Auckland

Individual research sponsored by medical and educational research foundations is beginning.

PUBLICATIONS

Journals

No professional journals solely in mental retardation are published. The "Intellectual Handicap Review" a quarterly, is the official NZSIH Journal.

Directories

Special Services
Department of Education
Wellington

Directory of Services for
Handicapped Children in
New Zealand
Brothers of St. John of God
"Marylands" Christchurch

Directory of Social Services in
Wellington
P.O. Box 1314, Wellington

Community Care
New Zealand Society for the
Intellectually Handicapped
P.O. Box 1063, Wellington

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis, assessment, consultation with parents - There is no organization directly responsible for case finding which therefore in infancy depends on the concern of parents and the level of awareness of obstetricians, nurses, family doctors and pediatricians. A noteworthy service is provided throughout the country by the visiting nurses of the Plunket Society, an infant health service, who see more than 90% of all newborn babies and maintain contact for the first five years.

Diagnosis in infancy may be made by general medical practitioners and is usually confirmed by a pediatrician. Children may be referred to Hospital Child Health clinics which provide child guidance services and are extending their work for the retarded.

Counseling of parents is given by family doctors, pediatricians, psychologists of the Department of Education, social workers, and by the New Zealand Society for the Intellectually Handicapped.

A survey of the incidence of mental retardation has been done. There is no national register of retarded persons and no national register of children at risk, although in some hospitals pediatricians maintain "at risk" registers.

Education - School attendance is compulsory for all children including the educable intellectually handicapped from 6 to 15 years, though children usually attend from 5 years. The development of pre-school services depends largely on voluntary effort but is subsidized by the State. Most of these kindergartens and play centers will accept retarded children whose admission is recommended by a doctor or a psychologist of the Education Department. The NZSIH conducts pre-school centers for children not approved for admission to kindergarten and play centers.

Mildly retarded children enter normal school classes at 5 or 6 years and at 7 years are transferred to special classes within ordinary schools where they remain until 16 years. There are 180 special classes throughout the country, most in primary schools but some in intermediate and post-primary schools where work training may be given. There are also three residential special schools for children from 10 years to 18 years and there are special classes in the psychopaedic hospitals.

Moderately and severely retarded children (known as "intellectually handicapped") may from 5 to 18 years attend occupational centers which are provided by Education Boards and located on sites separate from other schools. Where there are between 6 and 11 children in an area, the New Zealand Society for the Intellectually Handicapped provides premises and the Education Board provides staff, transport and standard equipment. Where there are 12 or more children, the Education Board assumes total responsibility.

The Home Training Section of the Correspondence School provides a unique service to over 100 retarded children living in isolated areas by regular mailing of individualized learning materials, consultation with parents and a personal visit at least once a year.

Private (other than State) education is given at boarding schools such as St. Raphael's Home of Compassion (Carterton), Marylands Residential Special School for Boys (Christchurch) and Hohepa (Steiner) Home-schools (Napier and Christchurch).

Selection for admission to public (Government) and private (non-Government) special classes, special schools and occupational centers is made by psychologists of the Education Department who assess social as well as mental development, and who act as consultants to the teachers. There is also a medical examination.

Work-training & employment-Psychologists of the Education Department and psychologists and psychiatrists in the Health Service cooperate with voluntary organizations to make assessments or give advice concerning the placement of young persons in workshops and work-training programs. Training for retarded persons is offered in the Opportunity Workshops of the NZSIH, in workshops of the four psychopaedic hospitals, in Sheltered Workshops in Auckland and Christchurch of some local volunteer groups, and by the Disabled Servicemen's Re-establishment League in Wellington. For most retarded persons, employment within a workshop continues indefinitely. Very few moderately and serverely retarded persons are in open employment in New Zealand although it is the aim of the NZSIH to place as many as possible in outside employment.

Medical services - In New Zealand all hospital treatment and care is free. A charge, never prohibitive, is made for private medical consultations. The Department of Health's Child Health Clinics and medical staff give advice to parents of retarded children, but medical care is given by general practitioners, pediatricians and general hospitals.

Preventive measures against damage due to Rh factor are taken and the Guthrie test for PKU and other inborn errors of metabolism is carried out in all newborns. Vaccination against rubella and measles is widespread.

Residential facilities - Retarded children and adults who cannot live at home may be admitted to psychopaedic hospitals operated by local Hospital Boards, the largest of which has 720 patients. However, because of insufficient psychopaedic accommodation, many retarded persons are taken into mental hospitals where an attempt is made to provide appropriate programs for them. Inadequate community services for the retarded have resulted in excessive demand for hospital accommodation.

The New Zealand Society for the Intellectually Handicapped operates community family homes and hostels(through its local units)which offer housing for retarded persons attending schools or workshops, provide some short-stay accommodation for all ages and ongoing accommodation for adults. At present the NZSIH cannot meet the demand for accommodation.

Other residential accommodation is provided by the Rudolph Steiner Hohepa Homes for school children and young adults, usually the less severely handicapped; St. Raphael's Home of Compassion for physically and mentally handicapped women; Marylands (St. John of God) for mildly retarded and emotionally disturbed boys; and Corstorphone (Presbyterian Social Service Ass'n, Dunedin) for retarded women.

Within in the community in New Zealand there are still inadequate services for the intellectually handicapped forcing the placement in the large Hospital Board psychopaedic hospitals. The NZSIH and Government are at present working together to provide sufficient facilities for residence, education and work opportunity, and it is hoped that when the current building program is completed over the next 5 years the need will have been substantially met.

Financial assistance - The State gives subsidies of approximately 66-2/3% on capital expenditure by voluntary societies for the establishment and improvement of approved workshops, hostels homes and day care centers. It subsidizes some staff salaries and pays maintenance subsidy for children living in hostels.

Mentally retarded persons over 16 years receive a Social Welfare Invalidity Benefit (not dependent on insurance contributions) at the same rate as other disabled or chronically ill persons from which fees charged by the NZSIH for its services can be met.

Recreation - Apart from Boy Scout and Girl Guide groups, there is no organized recreational program for retarded persons. Some branches of the NZSIH run holiday homes for the retarded and their families and other service groups give concerts, parties and picnics. Many branches have teams participating in organized team sports such as football and hockey.

Research - The Human Genetics Research Unit, Medical School, Aukland, is carrying out extensive studies, particularly in metabolic anomalies. Dr. Robert Guthrie has assisted in mass screening for PKU and other genetic conditions, using blood samples from all newborns in New Zealand and from those born under medical supervision in the Pacific Islands, Fiji, Rarotonga, Western Samoa and American Samoa, the Tokelau Islands and the British Soloman Islands.

Personnel training - Head teachers in occupational centers are certified teachers with no specialized training in teaching retarded children though they may elect to take a short course in this after appointment. Special correspondence courses are now being developed for these staff by the Department of Education. Assistants are untrained apart from a six week in-service course. Psychopaedic nurses take a three year hospital course which also includes workshop training, kindergarten teaching and teaching the severely retarded.

Planning - Officers of the New Zealand Society for the Intellectually Handicapped are in direct communication with relevant government departments conferring on the expansion of services, but there is no special inter-agency committee. Following a conference between representatives of the Department of Health and Department of Social Welfare and the NZSIH in 1974 convened by the Minister of Health and Social Welfare, a joint venture was adopted between the government departments concerned and the Society to fully develop the existing pattern of community facilities for the intellectually handicapped in New Zealand. The Government through its Departments has agreed to provide and meet the full cost of a substantial program of residential accommodation and sheltered employment facilities in the community for the intellectually handicapped. These facilities will be made available to the Society to operate with Government assistance of approximately 66-2/3% of running costs.

OTHER INFORMATION FOR VISITORS

The General Secretary of the New Zealand Society for the Intellectually Handicapped will give advice and further addresses for contact.

The Education Department and the Health Department will offer advice or assist in arranging tours according to the visitor's academic or professional interest.

School holidays - The annual vacation period is from mid-December to the end of January; second and third weeks in May; mid-August to first week in September.

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NICARAGUA

Nicaragua is the largest of the Central American Republics with an area of 57,100 square miles and coastal lines on both the Pacific Ocean and the Caribbean Sea. Its population of slightly more than 2 million is largely of mixed Indian and European (Spanish) origin, as well as a small percent Black.

Long under Spanish rule, Nicaragua has been an independent republic since 1838. Its 1972 constitution provides for a bicameral legislature and a President who is elected for a 6-year term, cannot succeed himself, and presides over the Cabinet of 10 Ministers. The capital city, Managua, has a population of almost 500,000.

Agriculture and forestry are still main supports of the economy, but industrialization has made much progress in recent years. Spanish is the official language and the literacy rate for people over 15 years of age is 57%.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Ministerio de Educación Pública Director de Educación Primaria Managua	Ministry of Public Education Director of Primary Education
Ministerio de Salud Pública Managua	Ministry of Public Health
Junta Nacional de Asistencia y Previsión Social (JNAPS) Managua	National Council for Social Assistance and Insurance

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Diagnosis and assessment - is carried out under the supervision of the directors of the two schools for the mentally retarded.

Education - Escuela Nacional de Orientación y Educación
"Dr. Apolonio Barríos Mayorga"
Profesora Olga Tenorio, Directora
Managua

This national school of guidance and special education, which serves deaf as well as mentally retarded children, has an enrollment of 76 pupils. It has been operating for more than 15 years.

Escuela de Enseñanza Especial No. 2
"Dr. Gonzalo Meneses Ocón"
Profesora Isaura García Castrillo, Directora
Managua

This school was recently established and has about 45 pupils, including both mild and moderately retarded. Both schools are under the supervision of the Education Department and receive assistance from the Junta Nacional. By 1977 the Centro Nacional de Menores Especiales (CEME) was to begin functioning as the main center for special education.

Residential care - is provided in the mental hospital (Hospital Neuropsiquiatrico) which has a section for mentally retarded children. Two teachers conduct class programs.

Financial assistance - Through the Ministry of Education, the State contributes to the salaries of special school teachers. Other expenses must be funded through private sources. Pupils in school No. 2 pay a small fee.

Personnel training - Several of the teachers have had special training in Mexico, Panama, Argentina and France.

OTHER INFORMATION FOR VISITORS

Requests may be directed to the Ministry of Public Education.

School holidays - The long vacation extends from December 1 until January 31 throughout the country.

NIGERIA

The Federal Republic of Nigeria lies on the southern coast of the West African bulge on the Gulf of Guinea. It is a member of the British Commonwealth and was a leader in the development of the West African Economic Community which includes 15 French, English and Portuguese speaking countries. It occupies 356,669 square miles and is Africa's most populated country (64,630,000 people), with most living outside the major cities. Lagos is the capital city. There are almost 250 tribal and linguistic groups in Nigeria; English is the official language. Religions include Moslem, Animist and Christian. Oil is the major export product, tin and cocoa are second.

At independence from Great Britain in 1960, Nigeria was a loose federation of self-governing states. Since 1966 the Supreme Military Council has governed the country; a democratic government is planned by 1979. When Biafra, the eastern region, seceded in 1967, civil war broke out; Biafra capitulated in 1970 after widespread starvation in the state.

There is a fairly uniform national school system, with over 4 million students in primary, secondary, technical and university education, the latter including law and medical studies. Entrance to secondary schools is based on competitive entrance examinations.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ministry of Health
Broad Street, Lagos

Ministry of Education
Tafawa Balewa Square, Lagos

Ministry of Labor and Social Welfare
Independence Building, Lagos

Provincial

Committee for Handicapped Children
P.O. Box 1231, Ibadan
Western State

(Additionally, the States have Ministries similar to the federal ones.)

Planning

Association for Handicapped Children
c/o Institute for Child Health (ICH)
University of Lagos
Health Center Bldg., Randle Ave
Surulere, Lagos

The ICH, a service, training and research organization, was started in 1965; the Association, started in the same year, tries to coordinate the various government and voluntary services.

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Citizen

"The Cheshire Homes of Nigeria," with headquarters in Lagos and branches at these locations:

Cheshire Home
91 Agege Motor Road, Mushin,
Lagos

Oluyole Cheshire Home
P.O. Box 1425, Ibadan
Western State

Other voluntary organizations which include mental retardation
Citizen

Nigeria National Society for Rehabilitation
of the Disabled
Orthopaedic Hospital
Igbobi, Lagos

This organization was started in 1971 and is an affiliate member of Rehabilitation International.

Child Care Social Services Women's Voluntary Organization
c/o The Secretariat
21 Olonode St., Yaba, Lagos

Child Treatment and Placement Home
146 Kirikiri Rd., Ajegunle (Apapa), Lagos

Child Guidance Clinic
P.M.B. 1054, Yaba, Lagos

The Red Cross
c/o The Spastic Clinic, Orthopaedic Hospital
Igbobi, Lagos

Good Samaritan School for Handicapped Children
P.O. Box 1231, Ibadan, Western State

Good Samaritan Movement
P.O. Box 4032, University College Post Office
Ibadan, Western State

"Gidan Yara Don Dakikai Da Tababbun" (school)
Opposite Government Secondary School
Zaria City, North Central State

PUBLICATIONS

Two directories of services for the handicapped have been published by the Institute for Child Health - one for Nigeria, and one for the Lagos area.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Diagnosis and assessment, consultation to parents, education and work training - Mental retardation services in Nigeria are generally provided through agencies that also deal with other handicapping conditions besides mental retardation, since these conditions received attention earlier than did mental retardation, traditionally the responsibility of the family and local community people. Services have been for the most part missionary, volunteer, or university operated, and funded by donations and fees, although in the past several years the state and federal governments have taken on partial funding responsibility. Additionally, they have mainly been for children, and are concentrated in major cities such as Lagos, Ibadan, Enugu and Kaduna.

Child guidance clinics, schools and institutions are the most prevalent types of services. The clinics do diagnosis and assessment, consultation to parents, and treatment, while the schools provide primarily non-academic training of a pre-vocational nature.

The government has established the Child Care and Treatment Home and School, the Child Guidance Clinic at the Institute of Education of Lagos University, and the Educational Unit for the Handicapped at Orthopaedic Hospital, all in Lagos. The latter also offers occupational therapy. The Institute for Child Health, in conjunction with the Lagos State government and the Neurology Clinic of the Department of Pediatrics at the University of Lagos Medical School, provides a voluntary registry for the handicapped and encourages government action on their behalf. ICH also gives consultation to parents, diagnosis and assessment and medical services at the Institute and in other locations such as schools and institutions. The Orthopaedic Hospital in Lagos, as well as other hospitals, provide medical care.

Research and personnel training - The ICH has planned to conduct some survey and biochemical research on mental retardation, and research on the adaptation of foreign intelligence tests for Nigerian use has been carried out in the University of Lagos, the University of Ibadan, and the Child Guidance Clinic in Yaba. There is a shortage of trained personnel, but training has been done at the ICH and the Teaching Hospital College of Medicine, Department of Pediatrics, University of Lagos, as well as abroad. Also, training by means of occasional 1-day seminars on mental retardation has been conducted by the ICH.

OTHER INFORMATION FOR VISITORS

This can be obtained from the Institute for Child Health.

School holidays - Approximately August 15 to September 15; December 13 to January 19; April 26 to May 20.

NORWAY

Norway is bounded on the east by Sweden, Finland and the USSR; its 1,000 mile coastline is indented with deep fjords, and about one-third of the land area (125,181 sq. miles) lies above the Arctic Circle, warmed by the Gulf Stream. Deep valleys and barren or forested mountains cover so much of the country that only 3% of the land can be cultivated. With 3.8 million inhabitants, Norway has the second lowest population density in Europe, the highest life expectancy rate in the world, and a high and evenly divided standard of living.

After having been united with Denmark and then Sweden, Norway became an independent constitutional monarchy in 1905 (although its constitution dates back to 1814), based on democratic principles of citizen participation in local self-government; the political power is centered in the Storting (Parliament).

Long dependent on farming and fishing, Norway has developed into a modern, industrialized society, many changes having taken place especially within the last three decades.

Compulsory elementary education was first introduced in 1739 and a compulsory education act for handicapped children was adopted in 1881. Ordinary elementary schooling lasts for 9 years, beginning at age seven. For handicapped children the right to schooling can be extended in either direction, i.e. in theory from birth to death. The new Education Law of 1975, supercedes separate laws for ordinary and for special schools.

Every citizen belongs to the National Health Insurance System which covers virtually all medical and hospital needs with costs shared by the State, municipalities, employers and wage-earners. Similar systems provide unemployment and disability insurance, and other social benefits as child allowances, maternity benefits, old age pensions, and rehabilitation services are considered important ways of promoting the common welfare by social and economic action.

In contrast to other Scandinavian countries, governmental responsibility for the mentally retarded has been more sharply divided between education and health authorities, and the provision of services for those not considered able to attend special schools for the mildly retarded was shared to a far greater extent with voluntary organizations and private individuals in close cooperative arrangements. Partly through pressure by individual pioneer parents, new systems came into effect in 1949 and 1951, and in the two decades following the number of persons receiving care (not attending special schools) increased from 500 to over 6,500. The 1970 Hospital Law gave full responsibility to the county authorities to plan, establish and run services for the mentally retarded.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Kirke-og undervisningsdepartementet Oslo-dep. Oslo 1	Ministry of Church and Education Department of General Education Schools for Handicapped Children Division

Sosialdepartementet	Ministry of Social Affairs
Helsedirektoratet	Directorate of Health
Kontoret for Psykiatri	Psychiatric Division
Oslo-dep.	
Oslo 1	
Overlege Otto W. Steenfeldt-Foss	Chief Medical Director

VOLUNTARY ORGANIZATIONS

Primary concern in mental retardation

Norsk Forbund for Psykisk Utviklingshemmede Nedre Vollgate 9 Oslo 1	Norwegian Association for the Mentally Handicapped

Founded in 1967, a primary aim of the Association is to bring together the parents groups in their own national organization in order to give their special viewpoints more public emphasis, and to represent more actively the still unmet needs and special rights of mentally retarded children and adults. The Association became a member of the International League of Societies for the Mentally Handicapped in 1968.

In 1977 on its 10th anniversary, the Norsk Forbund with 10,000 members in 160 local associations could claim to have gained an increasingly important influence in the development of public services to persons with mental retardation.

Samordningsrådet for åndssvakesaken i Norge Torggaten 10 , Oslo	Coordinating Council for the Mentally Retarded in Norway

The Council was established in 1951 on the suggestion of the Minister of Social Affairs, in order to help implement the 1949 plan by which financial assistance could be given to the voluntary sector for building and maintaining facilities. The Council consists of representatives of a number of county committees and national humanitarian and health organizations, which have taken responsibility for providing residential and day services, plus delegates from the Teachers' Society and the Association of Directors of facilities for the mentally retarded.

Other organizations which include mental retardation

Norges Røde Kors Barnehjelp Fredrik Stangsgate 25 Oslo	Norwegian Red Cross Children's Aid

The other national organizations which participate in the Coordinating Council not listed above are:

De Norsk Diakoners Broderforbund	Norwegian Diocesan Brotherhood Union
Nasjonalforeningen for Folkehelsen	National Public Health Ass'n.
Norges Bondekvinnelag	Norwegian Farm Women's Society
Norges Husmorforbund	National Ass'n of Housewives
Norsk Folkehjelp	Norwegian People's Relief Ass'n.
Norske Kvinners Sanitetsforeningen	Norwegian Women's Health Org.

RESEARCH

See brief notes

PUBLICATIONS

Journals

Rapport Ruth Erlandsen, Editor Torggaten 10,Oslo	Quarterly journal (since 1954) of Samordningsrådet for Åndssvakesaken i Norge
Vår Rett Sigurd Gohli, Editor Nedre Vollgate 9, Oslo 1	Quarterly journal (since 1970) of Norsk Forbund for Psykisk Utviklingshemmede

Directory

A detailed directory of services and number of residents is issued annually by:

Helsedirektoratet
Kontoret for Psykiatri
Oslo-dep.
Oslo 1

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Most early case finding takes place through maternity hospitals, general practitioners or public health nurses in the 1,400 health centers for mothers and children scattered throughout the country which provide infant care and, in most cases, check-up services for small children. Pediatric or neurological and psychiatric departments of larger hospitals are the resource for secondary assessment. The Oslo Observation Home and Policlinic provides an outstanding multidisciplinary assessment, treatment and consultation service. This was one of the first comprehensive diagnostic centers in Europe; it has set a high standard and has had an important impact on the whole country.

Education - Schools for the mildly retarded were at first only residential but increasingly special day schools and classes have been provided in the larger municipalities. In view of Norway's widely scattered population, the need for boarding schools remains high. It is estimated that special schools for all types of handicap must provide for approximately 2% of children of primary school age, but present facilities fall far short of this. In 1967, 41 special schools with places for 2,200 mildly retarded pupils were in existence with about 5,600 places needed, according to an estimate by the Special Schools Advisory Council.

As of 1976, Norway discontinued its separate school system for the severely retarded governed by a separate law. Now a general education law ensures equal rights to education for any child regardless of degree of handicap.

Work training and employment - Norway has a long history of providing services to the handicapped, but as in most other countries the mentally retarded were one of the last groups to be included and still today form only a small percentage of those served in sheltered workshops and vocational training centers. The Oslo Støttelaget for Åndssvakesaken (HELP organization) serves 70 trainees in the newly-built Fossheim Verksteder; Varatun in Stavanger and Heimdal in Trondheim are more recently established workshops. While a few trainees have been placed in open employment, in general for older adolescents and adults the available programs, outside of residential institutions, are in small non-industrial work centers.

Medical care - As in the other Scandinavian countries, general child health services are of high quality and accessibility. Medical care for the more severely retarded, however, is primarily given in the residential institutions.

Residential care - Norway is divided into 16 (will soon be 19) mental retardation regions; in each there are one or more central institutions (Sentralhjem) and 2 to 10 smaller "homes". The largest, in Klaebu, near Trondheim, serves about 400 residents; next in size is Trastad gård in North Norway, Emma Hjorthshjem (Sandvika)near Oslo, and Bakkebø near Egersund. Klaebu & Emma Hjorthshjem are the only ones owned by the State, two are owned by counties, two by the Oslo commune, and the rest are under private management. Altogether there are 88 residential institutions and homes, most with fewer than 100 residents and many serving 15 to 30, or even fewer.

Hostels (community residences) are as yet few in number; about 700 children and adults are placed in subsidized family care. Among the humanistic voluntary organizations providing resident care (and day programs), the Red Cross is unique from the international point of view. The central home, Bakkebø, was initiated with Red Cross help and Grimmebakken home and school for 120 children and adolescents, 70 miles from Oslo, is still owned and managed by the Oslo Red Cross Retarded Children's Aid Committee.

Financial assistance - Under the 1949 law and later changes, residential services for retarded people had been financed cooperatively by the State, counties, communes and private organizations. Since 1970,the total cost is paid by State and counties. Homes and centers must be approved by the Health Directorate of the Social Affairs Ministry which provides transportation expenses, construction costs of certain buildings and maintenance costs, a part of the latter to be reimbursed by the home town or commune of the retarded person. Private and municipal central homes may include interest payment of loans in the yearly subsidized budget. Parents do not pay fees, and each handicapped person above the age of 16 is entitled to a disability pension.

Recreation - Norwegians are an outdoor sport-minded people and retarded persons learn to ski, spend holidays in the mountains and, as in other Nordic countries, enjoy travel in groups to the Mediterranean countries. A privately initiated holiday hostel with small cottages, Solgården, has been built on the Spanish Costa Brava where groups or families from Norway may spend vacations.

Research - Norway's most significant contribution to mental retardation research has been the work of Dr. Asbjørn Følling, discoverer of PKU (phenylketonuria or Følling's disease) in 1934. While most later research has been on medical problems and there is no research institute specifically on mental retardation (and little collaboration between disciplines), there is increasing interest in the behavioral and learning areas, centered primarily in the Institute for Educational Research of the University of Oslo. Some funds for research have been raised by Samordningsrådet for Åndsvakesaken i Norge.

Personnel training - Lack of enough specialized personnel is considered one of the most acute problems. Since 1960 a new type of diploma course for special teachers has been offered, the first year on basic teaching emphasizing the child rather than the handicap, followed by a year of specialization in one of three areas - deaf, retarded or maladjusted. Three-year training courses for care personnel are being offered in four of the larger institutions; eventually each central institution is to have a basic education course for direct care personnel. Nurse training is 3 years and may be followed by an advanced course in psychiatric nursing. Only short courses in mental retardation have been offered in other disciplines such as medicine, psychology, pedagogy, social work, and for the directors of smaller residential homes.

Planning - Since 1945 when regional planning was initiated, local services have developed gradually; eventually each region is to have an adequate spectrum of programs and facilities to serve its own population. A recent development, resulting from the work of a parliamentary committee, is the appointment in 17 of the mental retardation regions of an inspection team with responsibility to monitor all services, particularly in regard to the rights of each retarded individual; each team consists of a lawyer, a social worker, and a parent, with their alternates.

OTHER INFORMATION FOR VISITORS

Assistance in making visits can be requested from:

Helsedirektoratet
Postboks 8128
Oslo-Dep.
Oslo 1

Norsk Forbund for Psykisk Utviklingshemmede
Nedre Vollgate 9,
Oslo 1

School holidays - The summer vacation period extends from mid-June through mid-August.

PAKISTAN

The Federal Islamic republic of Pakistan has a population of 70 million and an area of 310,413 square miles. Following partition from India in 1947 it then became a sovereign nation divided into two provinces on either side of India, 1,000 miles apart. The 1971 rebellion and the Pakistani-Indian war resulted in East Pakistan becoming an independent nation, Bangladesh. Diplomatic relations between India and Pakistan were resumed in 1976. The constitution adopted in 1973 established a parliamentary form of government but the political situation has remained unstable.

The country is multi-ethnic and multi-linguistic. Urdu is the official language but English is widely spoken and an accepted language in government. Almost all of its population is of the Islamic faith, this having been one of the underlying reasons for the fight for independence from and continued difficulties with India. Karachi and Lahore are the largest cities; the new capital has been located at Islamabad.

Since 1947, Pakistan has made considerable progress in developing from an almost exclusively agricultural economy, but the average standard of living is still low; per capita income is about $95 annually. There is considerable unemployment and underemployment and literacy is still low. Education is free through the tenth grade.

GOVERNMENTAL AGENCIES WITH PRIMARY RESPONSIBILITY FOR MENTAL RETARDATION

Ministry of Health
Government of Pakistan
Islamabad

Ministry of Education
Government of Pakistan
Islamabad

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation

Society for Children in Need of Special Attention (SCINOSA)
26, Oriental Chambers
Altaf Hussain Road
P.O. Box 4929
Karachi 2

The Society for Children in Need of Special Care was founded in 1962 by its Honorary Secretary General, Mr. A.S. Muslim, father of a retarded son, who started a day home (with just 2 children) which now serves as day center and training school for more than two dozen boys and girls ranging in age from 4 to 20 years. Emphasis is on handicraft training, music, and social adaptation. An active scouting program is an important feature of the school.

The Society depends on financial appeals to the public and has received some aid from the National Council of Social Welfare, interested groups in Norway and assistance in meeting costs of transport and salaries of teachers through the Jinnah Post Graduate Medical College, which also provides technical assistance and guidance. SCINOSA is a member of the International League of Societies for the Mentally Handicapped. Other groups supporting services are:

Association for Retarded Children
125-G, Block 2, P.E.C.H.S.
Karachi

Amin Maktab
c/o Mr. Yaqub Shah
11-C, Waris Road
Lahore

Chambeli's School
c/o Mr. M. Bhandara
Murree Brewery
Rawalpindi

Other organizations which include mental retardation

ABSA
225/A, Block 2, P.E.C.H.S.
Karachi

AlShafa, School for the Handicapped
Karachi Airport

Rehabilitation Society of Karachi
c/o Jinnah Postgraduate Medical Centre
Karachi

Pakistan Association for Mental Health Research
Ghafoor Chambers
Karachi

PUBLICATIONS

Journal of Pakistan Medical Association
Karachi

Research in Mental Retardation, Jinnah Postgraduate Medical Centre,
Karachi 35, April 1971

BRIEF PROGRAM NOTES

Information is limited, but mental retardation services have been increasing since the first day and training school for retarded children was opened by the Society for Children in Need of Special Attention in 1962; a few others have been opened by voluntary societies since then, for example, one in Lahore and one in Rawalpindi.

Departments of neurology and/or psychology at the larger teaching hospitals provide the kind of services needed within the limitations of their resources in time, facilities and expertise. The best example is the Neuropsychiatric Unit, Jinnah Postgraduate Medical Centre, Karachi, where an extensive program is in operation under the direction of Professor Zaki Hasan, F.R.C.P.

The Jinnah Centre undertook a research project funded by the U.S. Social and Rehabilitation Service in 1964 (see "Publications") to determine the extent and type of mental retardation, service needs, and to create new services. This research group established a day and training school around 1964, which is still in operation at the Jinnah Centre. In general, the Pakistan Medical Research Council and the Ministry of Health coordinate financing of research.

OTHER INFORMATION FOR VISITORS

The Ministry of Health at Islamabad and in the provinces would be able to provide a program for professional visitors.

Requests can be directed to: Mr. A.S. Muslim, Hon. Secretary General
SCINOSA
26, Oriental Chambers
Altaf Hussain Road
Karachi 2

School holidays - The holiday period is approximately for three months ranging from May to September, depending on the part of the country.

PANAMA

The Republic of Panama occupies an isthmus which connects Central and South America. Its area is 28,753 sq. miles; its population is 1,670,000; its capital is Panama City. The government consists of a President, legislative council, and an elected assembly. Most people are Roman Catholic and Spanish speaking, although English is widely spoken. Education is compulsory for 7 to 15 year olds, and there are two universities in Panama City. There is a social insurance system for certain workers and their families under the Social Insurance Fund of the Ministry of Labor and Social Welfare.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Education
Panama City

Instituto Panameño de Habilitación Especial - IPHE	Panamanian Institute for Rehabilitation

Apartado 3567
Panamá 1

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

The autonomous Panamanian Rehabilitation Institute, IPHE, which is responsible for services to the physically and mentally handicapped, receives financial support from the Ministry of Health, the Ministry of Education, the National Lottery of Benefits, and various other private groups. IPHE is responsible for special education throughout the Republic of Panama, and has organized services which include programs of early stimulation in educational centers of 7 of the country's 9 provinces. Special classes have also been incorporated in elementary schools of the Ministry of Education as well as vocational training centers for teachers, and production workshops for the handicapped, including toy and traffic signal manufacture, cabinet making and carpentry. Now well over 300 graduates of the IPHE hold full time jobs and the government has passed legislation requiring any firm with more than 100 employees to hire at least one graduate of IPHE.

Parent groups are functioning in relation to some of the special schools and classes in Colon and in the interior.

In 1975, the Instituto Panameño de Habilitación Especial was the host organization for the Second Panamerican Congress on Mental Retardation, cosponsored by the Interamerican Children's Institute (OAS) and the President's Committee on Mental Retardation (U.S.A.) Through the PREP project of the Partners of the Americas program, IPHE has an exchange relationship with special services in the state of Delaware in the U.S.

OTHER INFORMATION FOR VISITORS

Visitors can request information from IPHE.

School holidays - The long vacation extends from approximately December 1st through January 31st throughout the country.

PARAGUAY

The Republic of Paraguay is a semi-tropical, land-locked country bounded by Bolivia, Brazil and Argentina; the capital city is Asunción, 1,000 miles by river to the ports of Buenos Aires and Montevideo. Paraguay is about the size of California (157,057 square miles) but has a tenth of its population (2.6 million). The vast majority of the people live within 100 miles of Asunción; about 95% are of mixed Spanish and Indian (Guarani) descent and, while Spanish is the official language, about 50% of Paraguayans speak only Guarani. A number of other foreign ethnic groups have settled in the country, many in agricultural colonies.

Paraguay gained independence from Spain in 1811. Its present government is highly centralized, and the President, General Stroessner, has been in office since 1964. A constitution providing for a bicameral legislature was adopted in 1967.

In 1970, a highway to Brazil to aid trade shipments was completed, and Brazil and Paraguay have plans to build the world's largest hydroelectric plant on their border, but Paraguay is still preeminently an agricultural country with cattle-raising and lumbering the mainstay of the economy. It is faced with the economic problems common to most developing countries: while international loans have assisted in large-scale development projects, there is a chronic shortage of local contributory currency, and it has not been possible to undertake all the needed social development programs, as in health and education. Nevertheless, the literacy rate is reported as 74%, although the average life span is only 45 years. There is a social insurance system for employed persons and their families, including medical benefits, administered by the Social Insurance Institute of the Ministry of Health and Public Welfare. The Institute has its own hospital and outpatient services.

The law on compulsory schooling for 7 to 14 year olds does not provide for any special education for mentally deficient children. In 1956 and 1958 two official special ("differential") schools were opened in Asunción, but primarily for backward or very mildly retarded pupils.

GOVERNMENTAL AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministerio de Salud y Bienestar Pública Departamento de Salud Mental Brasil y Pettirossi Asunción	Ministry of Public Health and Welfare Mental Health Department
Ministerio de Educación y Culto Division de Educación Especial Chile 860 Asunción	Ministry of Education and Culture Division of Special Education

VOLUNTARY ORGANIZATIONS

Citizen and Professional

DENIDE (Movimiento Pro Derechos del Niño
Deficiente)
Sebastian Gaboto 433, Asunción

BRIEF DESCRIPTIVE NOTES

Casefinding, diagnosis and assessment, consultation to parents - Casefinding is generally dependent on referral by parents, teachers, doctors or social workers and, most frequently, because of the child's difficulties in school. Diagnostic and assessment services are provided in a mental health clinic or a regional health center. A multidisciplinary evaluation team is part of the program of the:

Instituto Psicopedagógice de DENIDE
Sebastian Gaboto 433
Asunción

Education - The above-listed Psychopedagogic Institute is a special school for mildly and moderately retarded children established by DENIDE association of professional persons, parents and interested citizens.

The two official special schools are:

Escuela de Recuperación Pedagógica
Colón y Piribebey
Asunción

Escuela John F. Kennedy
Tecera y EE. UU.
Asunción

About 200 children are being educated in these two schools.

Personnel training - Some of the teachers have had training arranged through the Interamerican Child Institute in Montevideo, or in other centers in Buenos Aires or Madrid. Recently, there has been an active exchange between Paraguay and the state of Kansas, U.S.A. through PREP (Partners Rehabilitation and Education Program of the Partners of the Americas).

Planning - It is hoped in the future to develop adequate programs of vocational and occupational training. Specialized residential programs and adequate financial assistance plans are also a future goal.

The Mennonite agricultural communities in the arid Chaco region of Paraguay (with 60% of the country's area and 4% of its population)include about 6,200 German speaking persons in 35 villages. In 1976, the North American Mennonite Mental Health Services sponsored a visit by Mr. Jack Fransen of Canada to consult with teachers, pastors and parents on providing better services to retarded individuals.

OTHER INFORMATION FOR VISITORS

Requests may be directed to the:
Instituto Psicopedagógico de DENIDE
Sebastian Gaboto 433, Asunción

School holidays - The summer vacation which lasts through December to mid-March; Easter and other church holidays and a one or two-week winter vacation in July.

PERU

Peru is the third largest country in South America (496,222 sq. miles) with a population of 15,870,000, of whom about 46% are Indians mainly living in the central mountain areas of the Andes. The eastern section of the country is tropical rain forest reaching to the Amazon basin, and sparsely populated; while the coastal plain on the west is a narrow but highly productive area in which the capital, Lima, is located. Its population is over 3 million.

The powerful Inca empire had its seat at Cuzco in the Andes when the Spanish conquistadors began raiding Peru for its gold in 1533. Inca and earlier Chimu ruins make the country a mecca for archeologists. The Indians, descendants of the Incas, speak Aymara and Quéchua, the latter being one of the two official languages, together with Spanish.

Peru achieved independence in 1824, after having been the most important center of the Spanish colonial system. For much of its later history the government has alternated between constitutional civilian and military regimes. The present junta government took over in August 1976 facing many unsolved econmic and social problems, such as migration into the cities and unemployment.

Agriculture and stock raising occupy half the population; Peru is normally the world's top fishing nation (mostly anchovies, used for fish-meal). In 1972 the industry was crippled by disappearance of anchovies and has only partially recovered. Two years earlier a severe earthquake destroyed towns and killed thousands of people in northern Peru.

Education is free and compulsory for 7 to 14 year olds, but schools are often not available in rural areas and children often leave school after only a few years. Only a small percentrage of students are able to complete secondary and university studies; Peru's 5 universities include the University of San Marcos, the oldest in the Western Hemisphere.

Health services are provided by the government to certain workers through the clinics and 15 hospitals of the national social insurance fund, partly supported by the Ministry of Labor.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministerio de Educación División de la Educación Experimental y Especial Parque Universitario Lima	Ministry of Education Division of Experimental and Special Education
Ministerio de Salud Pública Av. Salaverry, Lima	Ministry of Public Health
Dirección Nacional de Rehabilitación	National Dept. of Rehabilitation
Dirección Nacional de Asistencia Social	National Dept. of Social Assistance

VOLUNTARY ORGANIZATIONS

Citizen and Professional

Patronato Peruano de Rehabilitación y Educación Especial
Porta 170 - Of. 413 (Oficina 413)
Miraflores, Lima

Established in 1960, the Patronato is concerned with all areas of exceptionality, mentally retarded, blind, deaf, physically handicapped. It has an 8-member directorate, a permanent secretariat and membership consisting of individuals, associations and institutions (schools, physical rehabilitation facilities, vocational training and sheltered workshops). It receives a government subsidy; regional boards have been established in various parts of the country, as well as affilitation with international organizations as Rehabilitation International, and the ILSMH. On the national level it promotes citizen action and public understanding of handicapping conditions; coordination and planning, as between public and private agencies. One of the early members of the Patronato is the

Asociación de Padres del Instituto "San Gabriel Arcangel"
Monte Major 166
Chacarilla del Estanque, Lima

Started in 1958, the Asociación maintains a day school for retarded children, a sheltered workshop/vocational training program, and a residential home for young adults.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - As in all countries in the process of development, specialized services for mentally retarded persons are few in number and available only in the Capital and a few other centers of population. Similarly, the initiative for starting modern services came from a few concerned parents and professional workers. In recent years the government has recognized the importance of prevention and early intervention, and some steps are being taken in this direction. Education authorities, for example, are to have responsibility for children as early as two years old. Most identification and parent counseling has taken place in the past only when the child enters school, although there are a few diagnostic services such as the Servicio de Niños del Hospital Psiquiatrico "Victor Larco Herrera," in Lima.

Education - There are some 14 private schools and 7 public schools, all located in coastal cities except for one in Iquitos, on the Amazon River. The first private school, "Instituto San Gabriel Arcangel"(1958) serves some 150 boys and girls; a vocational training program, sheltered workshop and a residential home for young adults have also been developed as continuing services for them. In Trujillo, there is the "Carlos A. Manucci" School for Special Children, and in Chimbote a center caring for retarded children has an early stimulation program reaching into the children's homes. Estimates of retardation are elevated because of the influence of malnutrition and cultural deprivation in the overcrowded "bariadas" of the cities.

Personnel training - The Ministry of Education is responsible for training of teachers. Some special short-term courses and consultation have been made available through the U.N. Agencies (UNESCO, ILO) or Unicef, U.S.A. aid programs and the Interamerican Children's Institute of the Organization of American States. The University of San Marcos has postgraduate training for teachers of the mentally retarded (1 or 2 year courses); in-service training or practicum has been available at the Instituto San Gabriel Arcangel and other special schools.

OTHER INFORMATION FOR VISITORS

Requests for information can be made to the

Patronato Peruano de Rehabilitación y Educación Especial
Porta 170, Oficina 413
Miraflores, Lima Sr. Rubén Reyes Salomón, President

School holiday periods - the long vacation is from the end of December through March.

PHILIPPINES

The Philippines, part of the Malay Archipeligo, has more than 7,000 islands with a total land area of 115,707 square miles. Population is 42,760,000, of which 55% are children and youth. It was christianized during three centuries of Spanish colonization and guided to self-government by the United States'till independence on July 4, 1946. Since 1972 the country has been under martial law with the President ruling by decree under a constitution proclaimed in 1973.

Predominantly agricultural, this country is endowed with rich natural resources. It exports sugar, copra, abaca, lumber, minerals, and handicraft. Other agricultural products are: rice, corn, bananas, pineapples, vegetables. It is slowly moving to industrialization.

The educational system consists of a six-year primary education, a four-year secondary education, and a minimum of four years of college work. The Department of Education supervises both public and private institutions in the country. Public primary and secondary education is free; instruction is largely in English. It is estimated that in some of the islands only about 40% of the children are in school. Besides English, Filipeno , and Spanish are official languages, but some 87 native Malayo-Polynesian languages are also spoken.

Roman Catholicism is the religion of about 83 percent of the population, which is predominantly of Malay origin, with Chinese, Spanish, and American the largest additional groups; about 10 percent belong to the Philippine Independent Church, and the remainder are other Christians, Moslems, and Buddhists. The estimated rate of literacy is 83 percent, one of the highest in Asia.

GOVERNMENTAL AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Department of Education, Bureau of Public Schools
Special Subjects and Services Division
Bureau of Public Schools
Manila

University of the Philippines
Special Education Department
University of the Philippines
Diliman, Quezon City

National Coordinating Center for the Study and Development of Filipino Children and Youth
312 Quezon Boulevard Extension
Quezon City

Department of Social Welfare
Bureau of Child and Youth Welfare
389 San Rafael Street
Manila

The Bureau of Child and Youth Welfare is responsible for:

Elsie Gaches Village
Alabang, Rizal (residential and day school)

Nayon Ng Kanataan
Manila International Airport Road
Pasay City

Reception and Study Center for Children and Youth
Epifanio de los Santos Avenue
Quezon City (serves delinquent, abandoned or retarded youth)

VOLUNTARY ORGANIZATIONS CONCERNED WITH MENTAL RETARDATION

Citizen:

Philippine Association for the Retarded (PAR)
c/o Children's Medical Center
117 10th Avenue, Cubao
Quezon City

This organization was established in 1973 and was one of the hosts of the first Asian Conference on Mental Retardation, supported by The Philippines Office for UNESCO and other government and voluntary agencies. Since 1976 it has been an affiliate member of the International League of Societies for the Mentally Handicapped.

Private organizations providing educational and/or other services:

Special Child Study Center
44 Rosario Drive, Quezon City Founded in 1954

St. Nicholas Center
13 Chico Street, Loyola Heights
Quezon City

St. Joseph of Cupertino's School
Mangyan Road, Loyola Heights
Quezon City Founded in 1965

Foundation for the Rehabilitation of the Retarded
1916 Orquieta, P.O. Box 4145
Manila Under church sponsorship; concerned with severely retarded persons. Founded in 1973.

Elks Cerebral Palsy Clinic
Dr. Deogracias Tablan, Director
Mandaluyong, Rizal This long established service also assists physically handicapped retarded children

Other community organizations engaged in regional activities for the retarded include Rotary clubs, Lions clubs, the Jaycees, religious groups, 4-H clubs, Scouts, other youth clubs, women's associations, Barrio Councils, and Parent-Teacher organizations. A "national mental retardation week" is observed each year.

RESEARCH

Research Evaluation and Guidance Division
Bureau of Public Schools
Manila

In the mid-1960's a survey was done in the province of Pampanga to determine the prevalence of mental illness and mental retardation.

PUBLICATIONS

Philippine Journal of Education
P.O. Box 1576
Manila

The government Departments sometimes publish reports on mental retardation services.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, parent counselling - An identification program through referrals from teachers, general practitioners and parents is done in public as well as private schools. There are diagnostic centers in 6 major cities. For better acceptance and understanding of a mentally retarded child by his family and community, frequent meetings and conferences are organized by school administrators and teachers.

Education, work training, residential care - The Bureau of Public Schools offers special education programs to "educable" retarded children and slow-learners. In 1973 there were about 150 such classes attached to ordinary primary schools. A small percentage of the more severely mentally retarded who parents can afford to pay are taken care of by about 6 special schools run by the voluntary agencies, all of which are in the greater Manila area. A few attend the day school for children and adolescents at the Elsie Gaches (residential) Village, run by the Department of Social Welfare. Additionally, the Department collaborates with voluntary organizations, church groups and local government in running day centers. Pre-school children who are mildly retarded are frequently integrated into the regular pre-school programs where these exist.

Residential care - The Elsie Gaches Village, one of the Department of Social Welfare's child-caring institutions, provides residential care, training amd rehabilitation for severely and profoundly retarded children between 4 to 21 years, some with physical handicaps. This program includes sheltered workshops for residents and non-residents.

Personnel training - The Bureau of Public Schools offers scholarships at the University of the Philippines College of Education, Department of Special Education. It has two programs, a one-year certificate of proficiency in teaching the (mildly) retarded and a Master's level certificate, both including a survey of all exceptionalities, including the gifted. Both include classroom practice. An emergency short-term program is available for teachers without a bachelors degree.

Seminars, work conferences, and in-service education courses are held for school administrators, guidance conselors, classroom teachers, and the general public. Peace Corps volunteers have also been used to team-teach with Filipino teachers. Teachers at private schools are sometimes sent to Normal Schools (teacher training institutes) and are not generally trained to the extent that public school teachers are; four of the private schools provide in-service training.

Courses offerred in some of the (10) schools of social work include emphasis on prevention and on rehabilitation and treatment of mental retardation.

Other information for Visitors

Assistance in planning visits can be requested from:

Special Subjects and Services Division
Bureau of Public Schools
Manila

Philippine Association for the Retarded
c/o Children's Medical Center
117 10th Avenue, Cubao, Quezon City

School vacations: the months of May and June, and January 21, Anniversary of the Bureau of Public Schools; April 9, Bataan Day; May 1, Labor Day; and June 12, Philippine Independence Day.

Supplemental information - Services for retarded adults (persons over 16 years) are being developed through these governmental and voluntary organizations:

Department of Social Welfare Rehabilitation Services San Rafael Street Manila	Vocational Rehabilitation Social Rehabilitation Selective Employment Community Rehabilitation Action Program
Philippine Foundation for the Rehabilitation of the Disabled Dao Street, San Antonio Village P.O.Box 1215, Makati 3117 Rizal	Unites citizens, government workers, institutions, voluntary agencies and professional organizations. Member: Rehabilitation International

POLAND

Area - 120,644 sq. miles; population - about 34 million, approximately 96% ethnically homogeneous; government - peoples' republic in which the parliament (Sejm) elects the Council of State and Council of Ministers, the latter carrying out the principle executive functions. The United Workers' Party is the most influential political force.

During the last 30 years Poland changed from an agricultural country to an industrial-agricultural economy in which the proportion of urban population is 55%. While there has been a gradual improvement of the internal economic situation, the housing problem remains difficult. The country is divided into 49 large administrative areas; voivodships are divided into communes. Especially during the last decade there has been a tendency towards decentralization and autonomy of local authorities.

Education is free and compulsory from ages 7 to 15. Beginning in 1978 secondary education (10 years of schooling) will become obligatory. There are over 1,000 vocational schools and 89 institutions of higher learning. Roman Catholicism is the prevalent religion.

A broad social security and insurance system provides free health care, disability and old age pensions, sickness and family allowances.

The size of the problem of mental retardation in Poland probably does not differ significantly from that in other European countries. The Ministry of Education, based on data from registration of children of pre-school age, estimates the proportion of children ineligible for normal school because of inadequate mental development as between 2 and 2.4%. Another estimate obtained through a field survey of randomly selected areas (size of sample equaling 85,000 children) showed a proportion of approximately 0.4% of the children with I.Q. below 50 in the age group 7 to 13.

Education programs for children in day and boarding schools are under the Ministry of Education's Department of Special Education. In the Ministry of Health and Social Welfare, the Department of Health Protection and Rehabilitation is responsible for diagnosis, medical and psychiatric treatment, as well as matters of vocational placement and rehabilitation. The problems of institutional care are dealt with by the Department of Social Welfare. Gainful employment of the mentally retarded, including sheltered workshops, is the responsibility of the Union of the Invalid Cooperatives.

During the last years significant progress in the field of mental retardation has taken place and is reflected in the development of services during this period, and in a rising awareness of the need for re-evaluation of the problem and of the principles of organization of services.

There is a big need for increase of services, for broadening their application (e.g. development of early detection and services for small children, development of community services for adolescents and adults), and for raising their level of functioning. Especially needed is coordination of different services in the field.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Ministries

Ministerstwo Zdrowia i Opieki Społecznej Miodowa 15, Warsaw	Ministry of Health and Social Welfare
Departament Opieki Zdrowotnej i Rehabilitacji	Department of Health Protection and Rehabilitation
Departament Pomocy Społecznej	Department of Social Welfare
Ministerstwo Oświaty i Wychowania Aleja I Armii WP, Warsaw	Ministry of Education
Departament Kszatałcenia Specjalnego	Department of Special Education

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation

Komitet Pomocy Dzieciom Specjalnej Troski przy Towarzystwie Przyjaciół Dzieci (TPD)	Committee for Help to Special Care Children at the Ass'n of Friends of Children
Mrs. Ewa Garlicka ul. Jasna 26 Warsaw	Chairman of the Committee

In 1963 the Committee of Help to Special Care Children was organized as an autonomous body within the long established Association of Friends of Children (TPD); it includes both parents and professionals working in the field of mental retardation. During the following years the Committee became a national organization and created many (now 115) local chapters in voivodships and cities. The Committee initiated many measures aimed at development of services such as schools for the moderately retarded, day centers, kindergartens, sheltered workshops, youth clubs, etc. Considerable progress was obtained in organizing summer camps for the retarded. The role of the Association in changing public attitudes and also on the part of professions should be emphasized. Helping the mentally retarded and their families has been lately included into the programs of the whole TPD Association, which has its chapters in every locality and membership of 900,000.

Polski Zespół do Badań Naukowych nad Upośledzeniem Umysłowym przy ZG TPD ul. Jasna 26 - Warsaw	Polish Group for the Scientific Study of Mental Deficiency at TPD (Association of Friends of Children)

Established in 1969 as an autonomous section within the Polish Society for Rehabilitation of the Disabled, and in 1972 moved into the Association of Friends of Children.

The 2nd Congress of the International Association for the Scientific Study of Mental Deficiency was held in Warsaw in 1970, co-sponsored by the Polish Society for Rehabilitation of the Disabled. The group organizes interdisciplinary symposia on mental retardation and promotes research in the field.

Chairman of the Polish Organizing Committee and of the Polish Group for the Scientific Study of Mental Deficiency is I.Wald, M.D.; Secretary is J. Zaremba, M.D., both of the Psychoneurological Institute in Warsaw.

Organizations which include concern for the mentally retarded

Semi-official

Zwiazek Spółdzielni Inwalidów ul. Gałczyńskiego 4- Warsaw	Union of Invalids Cooperatives
Włodzimierz Pleszko	President

The invalids cooperatives are an integral part of the Polish cooperative movement. They are voluntary, self-governing bodies providing vocational rehabilitation and gainful employment for handicapped persons. Their economic activities form part of the national economic plan. Special economic privileges and financial provisions enable them to compete in the open market and to carry out their economic and social programs. About 190,000 disabled are employed in the cooperatives which include many large factories, along with specialized therapeutic(sheltered) workshops. On the nationwide scale the cooperatives are represented by the Union of Invalids Cooperatives.

Other

Polskie Towarzystwo do Walki z Kalectwem ul. Partyzantów 10 - Warsaw	Polish League for Rehabilitation of the Disabled
Prof. Marian Weiss	President

RESEARCH

Instytut Psychoneurologiczny Al. Sobieskiego 1/9 - Warsaw	Psychoneurological Institute
Instytut Matki i Dziecka ul. Kasprzaka 17 - Warsaw	Institute of Mother and Child Care
Zakład Badawczy Zwiazku Inwalidów Gałczyńskiego 4 - Warsaw	Research Center, Union of Invalids Cooperatives

Wyzsza Szkoła Pedagogiki Specjalnej im. Marii Grzegorzewskiej ul. Szczęśliwicka 40 - Warsaw	M. Grzegorzewska Higher School of Special Pedagogy (formerly Institute of Special Pedagogy)
Instytut Programów Szkolnych al. 1 Armii WP 25 - Warsaw	Institute of School Programs
Instytut Kształcenia Nauczycieli al. 1 Armii WP 25 - Warsaw	Institute of Continuing Education of Teachers

PUBLICATIONS

Materiały Informacyjno-Dydaktyczne Komitetu Pomocy Dzieciom Specjalnej Troski	Bulletin of the Committee for the Special Children's Care, published irregularly
Neurologia i Neurochirurgia Polska	Polish Neurology and Neurosurgery, published bimonthly
Psychiatria Polska	Polish Psychiatry, bimonthly
Szkoła Specjalna	Special School, quarterly

Directory - "Directory of psychiatric and neurological units, medico-educational and welfare institutions in Poland," published by the Psychoneurological Institute in a limited number of copies; not for sale.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnsosis and assessment, consultation to parents- All children from birth to 14 years receive regular free health checks and prophylactic care (vaccinations, etc.); from birth to 3 years it is provided by the local mother and child centers. Health care of older children is the responsibility of the pre-school and school physicians.

The mental health services, mostly through the mental health centers, provide both consultation to other physicians and direct treatment of mentally retarded persons. The network of mental health centers is being developed rather quickly; there is, however, a marked shortage in pediatric neurologists and psychiatrists. The centers provide medical as well as psychological evaluation and therapy, including speech therapy and physiotherapy with the retarded. The number of mental health centers was 60 in 1955 and 486 by 1974. A few neuropsychiatric children's sanatoria admit mentally retarded children for rehabilitation.

Special programs for early detection of some metabolic errors have been introduced by the Institute for Mother and Child Care, and screening of some 700,000 newborn babies for PKU has been performed. In 80 detected cases special diet treatment is being carried on under direct management of the Institute.

Education - Poland has a long-standing tradition of special education. As early as 1922 the Institute of Special Pedagogy was founded in Warsaw to prepare teachers for all types of special education. The special school network for the retarded was limited to the educable level until the 1960's when, on the initiative of the parents' movement, there were organized some schools and classes for the moderately, and sometimes severely retarded, known as "schools of life". Since 1966 these schools and classes have been incorporated into the special school system of the Ministry of Education.

In 1975, 408 special schools cared for 62,065 mildly retarded pupils, while approximately 10,000 were in special classes located in the ordinary schools. In addition, 129 secondary vocational schools accommodated 14,396 retarded pupils. There were 37 schools and approximately 100 special classes for 5,789 moderately retarded children.

There continues to be a shortage of places in special schools (about 80% of mildly retarded children are covered). In recent years there has been increased attention among educational authorities to the need for special education. In 1966 the Ministry of Education issued a statute for special schools for the mentally retarded which provided that pedagogical prognosis cannot be based on IQ alone, but only on a thorough longitudinal examination. In 1973 the Ministry of Education issued comprehensive guidelines for development of special education. They provide for 10-year special schools for the mildly, moderately and severely retarded. Yet, there are still problems concerning programs and methods of education, especially for the moderately retarded. Special kindergartens for mentally retarded children of pre-school age were introduced recently. There also has been increased attention to vocational preparation of mentally retarded pupils.

Work training and employment - Mildly retarded persons mostly find employment on the open labor market. For the moderately and severely retarded, programs have been developed during recent years for vocational training and work placement, mainly in sheltered workshops organized by the Union of Invalids Cooperatives. There are 62 sheltered workshops for the mentally retarded employed by the Cooperatives (11,770 spaces in 1976). In some places pre-vocational training programs are provided by chapters of the TPD Committee for the mentally retarded.

Medical care - In general, medical care of the retarded is incorporated into the general network of medical services. The care of infants and small children is carried out by comprehensive pediatric services and facilities for women and children in the Mother and Child Centers administered by the Health and Social Welfare Sections of the Voivodship Administration. Attached to these centers are the School Medicine Dispensaries. Both call on the services of special consultants in the fields of pediatrics, gynecology, obstetrics and child surgery. At the local level the Mother and Child Inspectorates are part of the local health centers. Preventive public health measures initiated in the post-war years have brought a sharp decrease in maternal and infant mortality, and a great improvement in the general physical development of children. At present (1976) systematic checkups of all child population ("health balances") concerning children at birth, 2, 4, 6, 10, 14 and 18 years are undertaken. Crêches and nurseries for children of working mothers are under the public health system and the number of children attending them and the kindergartens of the public school system is comparatively large. The system of mental health services providing consultation and treatment to children and adults in outpatient clinics is still limited primarily to the larger population centers.

Residential care - Institutions are run both by government and private organizations but the admission conditions are the same, and supervision is under the Department of Social Welfare. There are separate institutions for children (from 3-18 years); for adults able to work and for adults unable to work; certain adult institutions also include chronic mentally ill. Institutions are rather small in size, on the average 80 places, range 35-150 places. They are characterized by rather high standards of physical care, are mostly located far from big cities and rather poorly staffed in professional personnel. There is a long waiting list. Serious problems are created by shortage of places in homes for adults. As the residents in the institutions for children grow up and the rate of discharge from the institutions is rather limited, they gradually are being transformed into homes for children and young adults. In 1974, 118 institutions for children provided 10,029 places; there were 8,944 adults in 79 institutions. In some of the institutions there are limited educational programs and some vocational rehabilitation work is being carried out.

Financial assistance - All health services for children are supplied without charge; schooling is free. Within limits of their financial resources parents contribute to costs of residential care of minor children. Benefits under the social security system are particularly extensive in the area of health services. Since 1974 additional family allowances of 500 zl monthly (about $25) for the children who require special care have been introduced. This includes low-grade mentally retarded. There is no age limit for this allowance.

Recreation - The first programs initiated by the parents' groups were summer colonies for the moderately and severely retarded, and an increasing number are being provided every year, as well as special programs for "school of life" children during the year (14,000 children by 1976). Less handicapped children participate in the many recreation programs organized throughout the country by TPD Friends of Children. The local chapters of the Committee in several cities run youth clubs, sport clubs, music groups, etc. Summer vacation camps for young people employed in sheltered workshops are organized by Invalids Cooperatives. Recently TPD started special summer camps for severely retarded children age 6-9, combined with schools for their mothers.

Research - At the State Institute of Mother and Child Care, and also at the Psychoneurological Institute significant epidemiological studies in mental retardation have been undertaken. The PKU screening and treatment program at the first named institute has resulted in considerable research related to similar efforts in other countries. In several centers social science research has been conducted on the impact of mental retardation on families. The Institute of Philosophy and Sociology of the Polish Academy of Sciences carries out an extensive program concerning social determinants of mild mental retardation. Extensive research is undertaken in several of the large rehabilitation centers located in or near the major cities. The Union of Invalids' Coopeatives has done significant research towards vocational rehabilitation of the mentally retarded.

Personnel training - The problem of staffing in Poland, as in many countries, is of paramount importance. Although there are some 60,000 physicians, there is a very big need to train them in problems of mental retardation. There is a shortage of nurses and also of psychologists, highly qualified pedagogues and teachers, as well as vocational instructors. Since 1965 Poland has started to train social workers (their functions were previously partly carried out by psychologists and nurses). Special education teachers must hold a masters degree in special education, granted by the Higher School of Special Pedagogy or by Education Faculties of the Universities and Higher Schools of Pedagogy (now offered in 11 Universities). Teaching of the more severely retarded has become an integral part of the curriculum.

Planning - There is a great need for coordination at the interministerial level in order to unite the efforts of various agencies and organizations. Generally there are few community welfare units (i.e. any community day center or activity center provided by the welfare department - vs. residential institutions which are under welfare) for the mentally retarded. The TPD Committee for the mentally retarded and the Psychoneurological Institute have started day centers for more severely retarded children.

OTHER INFORMATION FOR VISITORS

Visits should be arranged through the Polish Travel Bureau "Orbis"
4, pl. Konstytucji
Warsaw

In planning a specialized program, contact with agencies listed above will be of help.

School holidays - The main school holiday periods are from the 5th of June to the 22nd of August; from December 22nd to January 6th.

PORTUGAL

Area - 35,510 square miles; population - 9.5 million. The dominant religion is Roman Catholicism. Originally a monarchy, Portugal became a republic in 1910 and from 1933-1974 had a unique system of government - a "corporate state." That system was overthrown by a military junta and after further changes in government, free elections under a new constitution were held in 1976, with the Socialist Party gaining a parliamentary plurality.

Agriculture, forestry and fishing have been mainstays of the economy, and for many years cork was the main industrial product. Industrialization has progressed in recent years and textiles and tourism are now of special importance.

Primary education is compulsory but there are still large pockets of illiteracy. Special education activities originally centered in the schools for the blind and deaf opened in the beginning of the past century, and were under the Ministry of Welfare.

Since 1933 Portugal has had a social and health insurance system that originally was developed for employees in industry and commerce and now is extended to all workers. Family allowances were introduced in 1942.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministerio da Sáude e Assistencia Praça do Comércio Lisbon	Ministry of Health and Welfare
Direcção Geral de Assistencia Largo do Rato Lisbon	Department of Welfare
Serviços Tecnicos de Educação dos Deficientes	Special Technical Services for the Mentally Handicapped
Ministerio de Educação Nacional Campos dos Mártires da Pátria Lisbon	Ministry of National Education

VOLUNTARY ORGANIZATIONS

Primary concern in mental retardation
Citizen and professional

Associação de Pais e Amigos das Crianças Diminuidas Mentais APPACDM Tv. Santa Quitéria, 87 Lisbon 2	Association of Parents and Friends of Mentally Retarded Children

The Association was begun in 1962 by a group of mothers of children with Down's syndrome. It was accepted in 1964 as a member of the International League of Societies for the Mentally Handicapped, and had in 1976 nine branches affiliated with the national organization in Lisbon.

Other organizations which include mental retardation

Instituto de Assistência Psiquiatra
Instituto de Assistência aos Menores
Santa Casa da Misericordia de Lisboa

RESEARCH

Instituto António Aurélio da Costa Ferreira
Tr. das Terras da Sant' Anna 15
Lisbon

Associação de Pais e Amigos das Crianças Diminuidas Mentais
Tv. Santa Quiteria, 87
Lisbon 2

PUBLICATIONS

A Criança Portugesa (For the Portugese Child)
Annual publication (since 1941) of the Instituto António Aurélio da Costa Ferreira which deals with medical, psychological and educational problems of all types of handicapped children; some volumes are dedicated to services and problems in other countries.

Boletin (Bulletin - and special publications of the APPACDM)

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents - There is no legal obligation to report cases of handicap, nor any specific case finding system. The Instituto António Aurélio da Costa Ferreira serves as an observation, diagnostic and consultation center to which children are brought by their families or sent by school, public assistance services, child welfare, pediatric and psychiatric clinics, etc. APPACDM also provides multidisciplinary evaluation and consultation, particularly for parents of moderately and severely retarded children.

Education - Education of handicapped children in general has been under the jurisdiction of the Ministry of Social Welfare with the exception of the mentally retarded who, if considered educable, are the responsibility of the Ministry of Education. There are about 100 special classes for mildly retarded children in Lisbon and other large cities, dependent for technical guidance on the Instituto António Aurélio da Costa Ferreira. The Instituto has a boarding school and also supervises two "re-education" boarding schools in Lisbon, the Instituto Adolfo Coelho for boys, and the Instituto Condressa de Rilvas for girls, where more handicapped children (I.Q. 40-60) are educated. Since 1965 the Centro de Reeducação e Assistência a Criança Mongoloide (a day school) has been supported by APPACDM.

Schools in areas without special classes attempt to provide smaller classes and special instruction for retarded children (some multi-handicapped children are to be found in residential schools for the blind, deaf, or physically handicapped). Special education is based on the principles of Decroly, Montessori, Descoudres, etc.

Work training and employment - Special classes do not provide vocational training, but the re-education schools emphasize practical training, seek employment opportunities for their pupils, and remain in contact with them. In 1976 the parents' association APPACDM opened a sheltered workshop.

Medical care - Specialized medical care has traditionally been considered primarily the responsibility of psychiatry and endocrinology.

Recreation - APPACDM has organized sport festivals and summer camping. A youth group affiliated with the Association assists.

Personnel training - One year courses for teachers of the mentally retarded are held by the Instituto António Aurélio da Costa Ferreira for a limited number of participants who have primary teacher qualifications or a university degree. This diploma is necessary for teachers of special classes in the ordinary schools. No training is necessary for supervisors (child care workers) in residential schools and homes.

OTHER INFORMATION FOR VISITORS

Information can be requested from:

Instituto António Aurélio da Costa
Ferreira
Tr. das Terras de Sant' Anna 15
Lisbon

Associação de Pais e Amigos das Crianças
Diminuidas Mentais
tv. Santa Quitéria, 87
Lisbon 2

School holidays - July 15 - October 1; two weeks for Easter and Christmas.

PUERTO RICO
(USA)

Puerto Rico has been voluntarily associated with the United States of America as a self-governing Commonwealth since 1952. It occupies a 3,421 sq. mile tropical island in the northeast end of the Caribbean Sea, with a population of 2,794 000. There is a bicameral legislature and a governor. As U.S. citizens, the people are eligible for federal social welfare and social security programs; they cannot vote in federal elections and do not pay federal taxes.

The official language is Spanish, although English is also widely spoken and is taught as a compulsory second language in the first eight grades. The people are Roman Catholic (85%) and Protestant (10%), with many also believing in spiritualism.

Although the unemployment rate is generally high (over 12%), the Commonwealth on the whole has one of the highest standards of living in Latin America. The greatest income is derived from various manufacturing industries and dairy and livestock production, with farming also important. The capital, San Juan, is the center of a large tourism industry.

Public education is free and compulsory at the elementary level, and about a third of the government budget goes to education; the literacy rate is at least 86%. There are secondary and vocational schools, the University of Puerto Rico, and three other universities and colleges. In 1968, 20% of those persons between 18 and 21 years old attended college or a university. Special education services for mentally retarded children were started in 1958.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Departamento de Salud	Department of Health
Secretaria Auxiliar de Madres y Niños División de Retardación Mental Box 9342 Santurce 00908	Assistant Secretariat for Mothers and Children Division of Mental Retardation
Departamento de Instrucción Publica	Department of Public Instruction
Programa de Educación Especial Box 759 Hato Rey 00919	Program of Special Education for Handicapped Children
Departamento de Servicios Sociales Box 11697 Santurce 00910	Department of Social Services
Programa de Servicios a la Familia	Program of Services to Families with Handicapped Children
Programa de Rehabilitación Vocacional	Vocational Rehabilitation Program

Program of Special Education (Teacher Training)
College of Education
University of Puerto Rico
Rio Piedras 00931

Corporation of Industries of Blind, Mentally Retarded, and Other Handicapped Persons
Box 8627
Santurce 00910

VOLUNTARY ORGANIZATIONS

Concerned primarily with mental retardation
Citizen

Asociación Pro Niños Retardados de Puerto Rico
Puerto Rican Association for Retarded Children - PRARC
Box 1904
San Juan 00936

Founded in 1958, the Association has held membership in the National Association for Retarded Citizens, U.S.A.

Fundación Para la Prestación de Servicios a Niños Mentalmente Retardados
Foundation for Services to the Mentally Retarded
Box 1384 Fernandez Junco Sta.
Santurce

This is a recreation and sports organization.

Asociación de Retardación Mental del Caribe
Caribbean Association on Mental Retardation
Secretariat
Street No. 1, F-17-B Terrace
Mayaguez

This organization has member societies throughout the Caribbean area. It was formally organized at the 2nd Caribbean Conference on Mental Retardation, sponsored by the PRARC and the Commonwealth of Puerto Rico in 1972 (see International Organizations section).

(Three other voluntary groups are connected with a specific school or service.)

PUBLICATIONS

The PRARC publishes a directory of mental retardation services, "Directorio de Recursos para el Retardo Mental en Puerto Rico."

In 1974, the Department of Health gathered statistical data on the prevalence (by age, sex, location and type) of mental and physical handicaps throughout Puerto Rico.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Diagnosis and assessment, medical care, consultation to parents - The Department of Health operates a pediatric center in Santurce and four diagnostic centers which also provide medical services and consultation to parents; one of these has an early stimulation program for high risk identified infants, jointly sponsored by the nursery program of the University Hospital and San Juan Municipal Hospital. A day center under the Department of Social Services also provides consultation to parents.

Education, work training, residential care - Educational services for children of all levels of mental retardation are available in special classes in regular public schools, in both public and private special schools, and in two private residential settings. Although services are concentrated in the major population centers, all of the 7 regional school districts under the Department of Public Instruction have at least some rural classes. In 1975, there were 292 "educable" classes and 57 "trainable" classes.

There are 7 private schools, among them the Instituto Psicopedagógico de Puerto Rico, started in 1949, and the Hogar de Niños Mentalemente Anormales; both have day and residential pupils.

Pre-vocational training and work training are generally available in the schools and also in vocational training centers. The Vocational Rehabilitation program provides placement and training through its five rehabilitation units for the retarded, its nine district offices, and three rehabilitation centers. A limited number of retarded adults (18 to 60) attend a day program under the Department of Health.

Financial assistance - Private schools usually receive some public subsidy. Puerto Rico is eligible for U.S. social welfare and education funds.

Recreation - The Fundación para Servicios a Niños Mentalemente Retardados operates sports, recreation and scouting programs. Schools also have recreation programs. These may be visits to Disneyworld in Florida, camping, and participation in the Special Olympics program.

Personnel training - Special education teachers are trained at the College of Education of the University of Puerto Rico and psychology students receive in-service training, specifically in behavior modification. A number of seminars have been provided for teachers, parents and camp counselors. Beginning in 1975, a 2-year demonstration project in citizen advocacy training was offered to 40 persons from 20 municipalities, under sponsorship of the PRARC and the University of Puerto Rico's Graduate School of Social Work.

Planning - The Puerto Rican Developmental Disabilities Council (Edificio Caso, Oficina No.901, Santurce 00908) is mandated to coordinate service delivery and stimulate additional services; it is funded by the U.S. Dept. of Health, Education and Welfare.

Information for visitors may be obtained from PRARC, or government agencies.
School holidays - July and August.

RHODESIA

Area: 150,820 square miles; population: 5 million of which about 250,000 (5%) are white; there are smaller groups of Asians and people of mixed parentage; government: formerly British self-governing colony which declared its independence in November 1965. Recognition was refused unless the white dominated government broadened voting rights to include eventually its vast majority of Africans. In 1977 negotiations are still underway following 11 years resistance by the government, years which have included international economic boycott, severe unrest, and guerrilla activities.

The country is rich in mineral wealth; farming among African groups is moving from a subsistence to a commercially productive level; light and some heavy industries are well established. 14% of the African population is now urban; there are 550,000 of all races living in the capital city of Salisbury. The main languages are English, Shona and Sindebele.

Enrollment of African children in primary school is extensive, but at present there is only a limited enrollment at secondary level; approximately half the student body at the University of Rhodesia is African. The number of children receiving special education is slightly more than 0.1% of all those in school. Education services are provided on a segregated basis until college level as between Africans and non-Africans, except in some private, mainly church, schools. Health and welfare services follow a similar pattern, with very few facilities open to people of all races.

GOVERNMENTAL AGENCIES WITH RESPONSIBILITY FOR MENTAL RETARDATION

Ministries

The Ministry of Health Services
Salisbury
(Responsible for care of the severely and profoundly retarded)

The Ministry of Education
Salisbury
(Responsible for special education for the mildly retarded)

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation

The Hopelands Trust
P.O. Box BE.90
Belvedere
Salisbury

The Trust is devoted to the care and training of moderately retarded white children, adolescents and young adults. Originally established in 1957 by

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a group of parents concerned because there was no place in the school system for their retarded children, it receives government subsidies which cover about 20% of the program cost. The Trust maintains four centres providing residential and day services for 160 children and adults. The Trust has ten local branches with approximately 800 members, and raises a third of its budget through public appeals. It held membership in the International League of Societies for the Mentally Handicapped until 1973.

The Salisbury Society for the Care of African Mentally Handicapped
The Secretary (SASCAM)
P.O. Box ST 189
Southerton, Salisbury (founded in 1963)

With the migration of African families from the rural areas to the cities, the problems of retardation are beginning to arouse considerable concern; two day care centers have been opened in Salisbury by SASCAM to serve seriously retarded African children. The Hopelands Trust has acted as an advisory body.

Including mental retardation

Jairos Jiri Rehabilitation Centre, Bulawayo

The first voluntary organization to be started by an African was established originally for the physically handicapped. It now includes every kind of handicap and has become a vast enterprise concerned with the production and sale of traditional crafts made by the handicapped of all ages, and with schoolling, agricultural training and rehabilitation services for disabled Africans in Bulawayo and three other centers.

Coordination:

The three above organizations are members of the Rhodesian Association of Societies for the care of the Handicapped and through this umbrella organization maintain a close relationship with each other.

RESEARCH

See BRIEF DESCRIPTIVE NOTES

PUBLICATIONS

A country with a limited professional population tends not to publish its own journals but to contribute to those of repute in other parts of the world.

BRIEF DESCRIPTIVE NOTES ON PROGRAMS AREAS *

Casefinding, diagnosis and assessment, consultation to parents - Professional help for parents and teachers is available from consultants in all fields attached to the Ministries of Health, Education and Social Welfare, and diagnosis, assessment and consultation are also done at the pediatric neurology clinic at the University of Rhodesia and the schools in Salisbury.

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*Unless noted these services relate primarily to the white population

Education - The Ministry of Education is responsible for the establishment, staffing and maintenance of special classes for the mildly retarded with an I.Q. range of approximately 50 to 70. Placement is the responsibility of the educational psychologist in cooperation with parents and teachers. Special classes are available in all town schools at both primary and secondary levels.

The Glengarry School, in Gwelo, is a boarding school for mildly retarded children whose homes are in widely scattered rural areas or who are unable to attend a local special class. There is also a Correspondence School program in Salisbury which serves homebound children.

The King George 6th Memorial School, in Bulawayo, serves physically handicapped children of all ages, with multiple-handicapped pupils with some degree of mental retardation. St. Giles Rehabilitation Centre in Salisbury is similar in function, but with a highly developed rehabilitation program for children and adults.

Hopelands Trust maintains two education programs. At the Sir Humphrey Gibbs Training Centre in Bulawayo, boys and girls are admitted from the age of three years; the majority live at home and are transported daily in the Centre's bus; a family cottage unit provides boarding care for twenty residents of all ages. St. Catherine's, Salisbury, is similar, except that the majority of children are boarders. Both these centres offer intensive training programs in personal and social skills, leading to productive activity which enables many of the older girls to contribute to their own maintenance.

Work Training and employment - The development of work skills and the provision of sheltered workshops is an integral part of the function of the Hopelands Trust. Employment opportunities are not easily available for retarded persons in a country which has a vast indigenous population seeking employment. The Trust maintains (in addition to the work training for older girls at the two above mentioned centers) the Montgomery Heights farm for adolescent boys in Umvukwes, and Homefield Farm near Salisbury, a village farm community for young adults near enough to the city for contact to be maintained with social and recreational organizations. A Sheltered Employment Project, in Salisbury, has been initiated jointly by the Hopelands Trust and St. Giles Centre, with support from commerce and industry.

The Jairos Jiri Rehabilitation Centre, in Bulawayo, has pioneered in providing sheltered work for Africans. SASCAM has started a vegetable gardening project as a first step toward a more extended sheltered work program.

Medical care - Government medical and dental inspections are conducted for all retarded children enrolled in special classes or in the Hopelands centres. Also, teams of medical consultants hold regular clinical sessions. Government hospitals provide medical, psychiatric and nursing care. Rubella and measles immunization programs are available but reach only about 50% of African children.

Residential services - Services available for mildly to moderately retarded children and adults have been noted above. Residential care for the severely and profoundly retarded of all races is limited to St. Francis Home, in Bulawayo, where children are admitted at birth or later as circumstances demand; they are given care, training and treatment by the Franciscan sisters who staff the home. At puberty they are transferred to the Ingutscheni Hospital (Bulawayo), the government mental hospital for adolescents and men and women of all races, and all types of mental disability.

Financial assistance - Children in special classes receive training, tuition and when appropriate, accomodation, on the same fee basis as the ordinary school-going child. Fees are remitted when the parents' situation indicates their inability to pay.

The Hopelands facilities receive a small government subsidy for each moderately retarded child or adolescent. At eighteen years of age, each resident who is unable to be employed because of his handicap, receives a monthly grant from the Social Welfare Department. The major part of the cost of care and training has to be met through fund-raising activities and donations.

SASCAM receives an annual grant from the Salisbury municipality, and the Salisbury Suburbs Round Table funded the construction of its first Day Center.

Recreation - All schools and centers have recreation programs in which the general public is involved, youth groups, individuals, and service clubs.

Research - The University College of Rhodesia, Salisbury, and the Teachers Training College, Hillside, Bulawayo, conduct research on various aspects of child development, detribalization, learning problems of an indigenous people, creativity, etc., in which various aspects of retardation may be included. Studies have been done on incidence and etiology of mental retardation in Rhodesian African children seen at pediatric clinics in Salisbury.

Personnel training - The Ministry of Education is responsible for the training of teachers, the planning of vacation courses and in-service programs for teachers of retarded children who are mildly handicapped. For others, in-service training is the most general form.

Planning - There is no officially coordinated planning; interested doctors are concerned in prevention, parents and similar citizen action groups with legislation.

OTHER INFORMATION FOR VISITORS

Further information may be requested from The Secretary for Education, Ministry of Education, Salisbury.

School holidays in Rhodesia

Mid-April to Mid-May
Last week August to last week September
Mid-December to last week of January

SAUDI ARABIA

Saudi Arabia occupies about 4/5 of the Arabian Peninsula, with an area of 829,995 square miles. Its population is about 9,100,000; its capital is Riyadh. The official language is Arabic; almost all Saudi Arabians are Bedouins and practice the Sunni Moslem religion. The west is covered by highlands and the east by desert, and agriculture (dates, wheat, barley, etc.) is restricted to the highlands and scattered oases. Saudi Arabia has the world's greatest oil reserves and receives most of its income from that industry; the second most important source of income is that from the pilgrims to Mecca and Medina.

The government's legitimacy is derived from the Koran and custom, and is headed by an hereditary king who exercises authority along with a Council of Ministers. Elementary and secondary education are free, but not compulsory. In 1975 there were 3 major universities and 2 technical colleges. In the same year, the Council of Ministers approved a 5-year plan to develop industry, transportation and education. A welfare state was developed under King Faisal, and services such as medical care are free,as are the 18 special institutes for the handicapped.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Department of Special Education
Ministry of Education
Riyadh

This ministry has official responsibility for administration and technical supervision of the special institutes for the retarded which had an enrollment in 1975/76 of 235 children.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Diagnosis and assessment, medical care, education and work training - Services are primarily based in Riyadh and are government operated. Riyadh has a central unit for health and social services, which includes a diagnostic and assessment team and personnel trained in mental health and guidance. There is also a unit for physiotherapy. The Department of Special Education oversees in Riyadh 5 schools for the mentally retarded, which include 27 special classes. These provide pre-school, elementary, vocational and physical education. They are supplied with special instructional materials by the Ministry of Education.

Personnel training - Personnel are primarily educators in the 5 special schools. They are usually trained abroad on fellowships.

Other information for visitors - Requests for information may be made to the Department of Special Education.

School holidays - June, July, August.

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SINGAPORE

Singapore is a small island with an area of 224.5 sq. miles, south of the Malaysian peninsula, with a population of 2.2 million of whom approximately 76% are Chinese, 15% Malays, 9% Indians, Pakistanis, Sri Lankans and others. Long a British Crown Colony, Singapore became internally self-governing in 1959 and for two years was part of the Federation of Malaysia, becoming an independent republic in 1965. It has a President, Prime Minister and unicameral Parliament of 69 members. Malay is the national language but Chinese, English and Tamil are also official languages; English is the language of administration and is widely used in professional and business circles and schools.

Singapore is the world's 4th largest port and the largest in Southeast Asia; the economy depends heavily on shipping and light industries. The state is conducting a vigorous campaign for industrialization, employment, housing and family planning. Health standards are high and the average life expectancy is 62 years. One-half the population is under 22 years of age.

Education in Singapore is available at pre-school, primary, secondary and past-secondary levels, and includes adult education as well as special education for handicapped children. Until 1960 there were no programs for the mentally retarded in the community. A limited number received care in the mental hospital,and the children's ward of the general hospital kept a registry of mentally retarded children. With the assistance of the Rotary Club and Singapore Children's Society, a small class for moderately retarded children was established. This resulted in the founding in 1962 of the Singapore Association for Retarded Children, which has taken leadership in providing services. A special education unit was set up in the Ministry of Education in 1973 to assist schools in the training of handicapped children, including the mildly retarded.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Health

Mental Deficiency Ward
Woodbridge Hospital
Singapore 19

Paediatric Unit
Outram Road General Hospital
Outram Road
Singapore 3

Institute of Health
Outram Road
Singapore 3

Maternal and Child Health Section

School Health Clinic

Ministry of Social Welfare

Rehabilitation Unit
11 Fort Canning Road
Singapore 6

Ministry of Education
Kay Siang Road
Singapore 10

VOLUNTARY ORGANIZATIONS

Concerned primarily with mental retardation
Citizen and professional

Singapore Association for Retarded Children (SARC)
844 Margaret Drive
Singapore 3

Founded in 1962, the Association has initiated educational and other services for moderately and severely retarded children. It is affiliated with the International League of Societies for the Mentally Handicapped, and is a founding member of the Asian Federation for the Mentally Retarded. To commemorate its 10th anniversary, it organized the first regional conference in Asia on special education and mental retardation, with participants from six other countries. In 1976, SARC sponsored the formation of an Association for Educationally Subnormal* Children (844 Margaret Drive) to take over its work for these children and encourage more attention to their needs by the regular school systems.

Other organizations which include services to the mentally retarded

Committee on Education of Handicapped Children
Singapore Council of Social Service
1st floor, Council of Social Service Building
11 Penang Lane, Singapore 9

Spastic Children's Association of Singapore
25 Gilstead Road, Singapore 11

Singapore Association for the Blind
51 Toa Payoh Rise, Singapore 12

Singapore Paediatrics Society
c/o Medical Alumni Centre
College Road, Singapore 3

PUBLICATIONS

The Journal of the Singapore Paediatrics Society has published articles on mental retardation, e.g. chromosome and genetic studies.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - There is no intensive case finding program, referrals coming usually through teachers, general practitioners, and parents. In addition to the records kept by the Paediatric Unit of the General Hospital, the Singapore Association for Retarded Children maintains a registry of nearly 4,000 children. Paediatricians and psychologists provide diagnosis and assessment; however, there is a long waiting list of children to be seen. Consultation to parents is provided by the Association through its professionally trained social worker, although language difficulties, existing traditional beliefs, level of literacy and need for additional staff have limited this program. As the work of SARC has become better known, more parents are willing to participate and work actively for their children. Frequent meetings are held with parents and the teaching staff of the Association's training centers.

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*(i.e. mildly retarded)

Education - Special education programs are just beginning for mentally retarded children in public schools. SARC can only provide for about 20% of the children on its register in its four training centers, which serve primarily children who are moderately or severely retarded - the Lee Kong Chian Centre (844 Margaret Drive) and the Chin Pu Centres at Toa Payoh, Geylang, and Jurong.

Work training and employment - As employment prospects are difficult even for non-handicapped workers, emphasis in the centers' training is to help the children fit into their home environment through instruction in self-help and practical activities. Independence training is provided for the older children who remain after school to make bus trips to their own homes and to places of interest in the neighborhood.

Medical services - are provided for children with minor ailments through infant welfare clinics and out-patient dispensaries; retarded children with severe illnesses are usually treated at the Paediatric Unit of the General Hospital, which also does medical diagnostic work as x-ray, EEG, ECG, and special investigations free of charge. A main problem is in providing medical care for the most severely retarded child who is entirely dependent on relatives for feeding and nursing care; such children often suffer from severe malnutrition, scurvy and vitamin deficiencies.

Residential care - For the very severely and profoundly retarded there are about 50 beds available at the Woodbridge Hospital for Mental Diseases, which always has a long waiting list. In 1969, the Singapore Association for the Mentally Retarded established the Tampines Home to provide nursing care and training for severely retarded children and adults. This represents only a small proportion of those on waiting lists; beds and personnel training are both lacking. For many years foster home care has been used for some children who are unable to live at home.

Financial assistance - Some funds are allotted by the Association to meet the immediate material needs of the children who come from poor families and who are attending the various centers. The Ministry of Social Affairs has provided funds for teachers' salaries in the SARC centers.

Recreation - Children attending centers go on excursions, to parties and picnics. Those who have left school meet fortnightly for games, dancing, or excursions. Weekend camps for some of the children are organized once a year.

Research - University affiliated, biomedical and genetics research is being carried out under the direction of Dr. Freda M. Paul, Paediatrics Unit, General Hospital, with the cooperation of the Singapore Association.

Personnel training - There is no formal course for training of special teachers and at the present time only a few of the teachers employed in the Association's centers have had special training overseas. In-service courses for the staff and also seminars for SARC's members, staff, and the general public have been held. Visits by professionals from other countries are utilized.

Planning - The Association works in close cooperation with other voluntary social agencies and is pressing for legislation to establish more adequate education services in the public schools.

OTHER INFORMATION FOR VISITORS

Assistance in planning visits may be requested from

The Council of Social Service
11, Penang Lane
Singapore 9

or the Singapore Association for Retarded Children.

School holidays - occur from the middle to end of April (2 weeks); the last 3 weeks of August; the end of November to the beginning of January (6 weeks).

SOUTH AFRICA

The Republic of South Africa has an area of 472,359 square miles and a population of 25 million. Head of the government is the State President, but the office of the Prime Minister is the center of power. There is a bi-cameral Parliament (White), and each of the four Provinces (until 1910 British Colonies) has a unicameral legislature known as the Provincial Council. Pretoria is the administrative capital and Johannesburg (both in the Transvaal) the largest city,metropolitan population of 2.5 million. Cape Town, the third largest city (after Durban), is the seat of Parliament and legislative capital.

The population is divided into 18 million Africans, 4 million Whites, 2 million Coloureds (mixed), and 700,000 Asians. A policy of separation of the races is applied. It is intended that the Africans will be citizens of future self-governing countries, of which Transkei will be the first to gain independence. The political future of the Coloured and Asian groups is uncertain, but the gradual integration with the White group cannot be excluded as a possibility.

Primary education is free for all, but compulsory only for White and Coloured children over 7 years of age. It is envisaged that all primary education will be compulsory by 1980. There are 16 Universities, of which 10 are for White students only. Special government permission is required for the admission of a non-White student to a University for Whites. Official languages are Afrikaans and English. The economy rests with the country's vast mineral resources, pastural and agricultural products, and a fast growing industry.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Government Departments generally do not provide services themselves but subsidize voluntary organizations, an exception is the education of the educationally subnormal child which is the direct responsibility of the Provincial Education Departments, the Department of Bantu Education, the Department of Indian Affairs and the Administration of Coloured Affairs.

Department of Health
Private Bag X88
Pretoria 0001

Department of Social Welfare and Pensions
Private Bag X63
Pretoria 0001

Department of National Education
Private Bag X122
Pretoria 0001

Administration of Coloured Affairs
Private Bag 9008
Cape Town 8000

Department of Labour
Private Bag X1117
Pretoria 0001

Department of Bantu Education
Private Bag X212
Pretoria 0001

Department of Indian Affairs
Private Bag X92
Pretoria 0001

Transvaal Education Department
Private Bag X76
Pretoria 0001

Natal Education Department
Private Bag 9044
Pietermaritzburg 3200

Orange Free State Department of Education
P.O. Box 521
Bloemfontein 9300

Department of Education of the Cape of Good Hope
P.O. Box 13
Cape Town 8000

National planning and coordination - Most services for the mentally retarded are rendered by voluntary welfare organizations which are subsidized by different government departments, depending on the age groups and races they cater for. The Department of Health subsidizes services for the profoundly retarded of the White, Coloured and Asian population groups, the Department of Social Welfare and Pensions services for adult Whites, the Department of National Education services for White children, the Department of Indian Affairs services for Asians and the Administration of Coloured Affairs services for Coloureds. Hardly any subsidies exist in respect of services for Africans, the reason being that the government is faced with a serious backlog in the provision of services for normal and educationally subnormal African children, which it regards as a priority.

The planning and coordination of government subsidized services is undertaken by the National Division for the Mentally Retarded, a sub-division of the South African National Council for Mental Health. There are some 50 organizations affiliated to this body, providing more than 80 homes, training centers or workshops for all population groups, whether subsidized or not.

VOLUNTARY ORGANIZATIONS

Concerned primarily with mental retardation

Division for the Mentally Retarded
c/o S.A. National Council for Mental Health
P.O. Box 2587
Johannesburg 2000

Transvaal Association of Parents and Friends of the Mentally Handicapped
P.O. Box 61685
Marshalltown
Johannesburg 2107

Western Cape Forum for the Mentally Handicapped
c/o Camphill Village
Kalbaskraal 7302

Others which include mental retardation in their program

National Council for the Care of Cripples in South Africa
P.O. Box 10173
Johannesburg 2000

S.A. National Council for the Blind
P.O. Box 1343
Pretoria 0001

S.A. National Council for Child and Family Welfare
P.O. Box 8559
Johannesburg 2000

S.A. Ass'n of Occupational Therapists
c/o H.F. Verwoed Hospital
Pretoria 0002

Psychological Institute of the
Republic of S.A.
c/o Department of National Education
Private Bag X122
Pretoria 0001

S.A. Inherited Disorders Ass'n
P.O. Box 1038
Johannesburg 2000

Transvaal Jewish Welfare Council
5, Becker Street
Yeoville
Johannesburg 2198

S.A. Psychological Ass'n
P.O. Box 10319
c/o National Institute for
Personnel Research
Johannesburg 2000

Algeneme Kommissie vir die
Diens van Barmhartigheid
(General Commission for Services of Mercy)
P.O. Box 4420
Pretoria 0001

RESEARCH

Central governmental research institute which includes mental retardation in its program:

Human Sciences Research Council
Private Bag X41
Pretoria 0001

Private organizations with a major interest in research in mental retardation (see above for addresses):

South African National Council for Mental Health
Psychological Institute of the Republic of South Africa
South African Psychological Association
National Institute for Personnel Research

PUBLICATIONS

Professional journals which most frequently publish articles on mental retardation:

South African Medical Journal
P.O. Box 643
Cape Town 8000

Psychologia Africans
P.O. Box 10319
Johannesburg 2000

Social Work
P.O. Box 223
Stellenbosch 7600

South African Journal of Occupational Therapy
c/o H. F. Verwoerd Hospital
Pretoria 0002

Rehabilitation in South Africa
P.O. Box X117
Pretoria 0001

Mental Health Facilities in the Republic of South Africa and Homes and Training Centres for the Mentally Retarded
S.A. National Council for Mental Health
P.O. Box 2587
Johannesburg 2000

Child Care Information Centre Directory of Services
Red Cross War Memorial Hospital
Rondebosch
Cape 7700

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents- Visits by trained public health visitors are undertaken soon after a birth has been reported to the local authorities. The public health visitors are trained to diagnose some forms of mental retardation and are capable of providing parents with advice.

The finding and diagnosis in older children is usually done by the family medical practitioner who refers the parent either to one of the government departments providing welfare services, the psychiatric unit of a Provincial Hospital, or a mental health society for further attention by a social worker who will arrange for placement or further tests.

Education - Compulsory education is presently limited to White and Coloured children who are considered to be educable, although parents of White retarded children may be compelled to have these children trained in a state-aided or private training center.

Work-training and employment - Work training and employment is undertaken by the Department of Labour in respect to high grade Whites, Coloureds and Asians. The Department of Bantu Administration and Development is responsible for Africans. Rehabilitation and sheltered employment is, however, restricted to those with a productivity potential of at least 50%. Similar schemes are to be introduced for Coloureds and Asians shortly.

Financial assistance - The Department of Health pays a monthly grant in respect to mentally retarded children maintained in a private home or in a home licensed by the Department to accommodate mentally retarded persons. The law provides that these homes must be able to satisfy the physical and intellectual needs of persons placed there.

The Department of Social Welfare and Pensions provides housing loans and subsidies in respect to hostels and protected workshops for adult Whites. Similar schemes will be introduced for Coloureds and Indians shortly. In addition all mentally retarded persons above the age of 16 receive a State pension.

The Department of National Education subsidizes training centers for White children liberally. There is also some government assistance available to training centers for Coloureds and Asians.

Recreation - Organized recreation in the forms of dancing, music, swimming, parties and games is available to children in residential homes. Parent groups also often organize outings and other recreation during school holidays.

Medical care - Medical care is available to residential institutions through regular visits by honorary medical practitioners or district surgeons. Free medical care is available to the indigent from district surgeons or at provincial hospitals.

Residential care - State residential care in respect to the mentally retarded is undertaken at four government institutions and a number of mental hospitals. Training is only provided in respect to White children at these institutions. Some forms of industrial therapy is provided, however, to all patients.

In view of the absence of government subsidies, residential homes are virtually confined to Whites. There are a large number of training centers, however, operating on a day-basis for other groups.

Research - In 1967 a State Committee of Inquiry into the care of mentally deficient White persons reported on its study. The recommendations in respect to the White population group have virtually all been implemented and it is now being investigated to what extent the recommendations can be applied for other population groups.

In June, 1976 the report of a Commission of Inquiry into matters affecting the Coloured Population Group was published. This Commission recommended inter alia that welfare services be confined to one government department instead of being spread under a multitude of departments for the different population groups, and that statutory separation of the races be abandoned. It seems unlikely, however, that these recommendations will be accepted at this stage, although a gradual move in this direction cannot be ruled out.

Personnel training - Specialized training in mental retardation is available to nursing assistants and public health nurses. Postgraduate training in mental retardation for teachers is also under consideration. Other personnel trained in mental retardation include psychiatrists, psychologists, social workers, physiotherapists, occupational therapists and speech therapists.

Planning - As services for White mentally retarded persons have been brought up to date with most other Western countries during the past five years, voluntary organizations are now concentrating in extending their services to other racial groups. Whereas welfare services were previously virtually only provided by Whites, it is increasingly found that members of the other groups are forming their own organizations and taking over responsibility. Cultural changes in the African and Asian groups particularly are creating an increased demand for services as families are no longer able to care for their own.

OTHER INFORMATION FOR VISITORS

Information about services can be obtained from the Division for the Mentally Retarded (see above for address). The Department of Tourism, Private Bag X252, Pretoria, 0001 will assist in arranging programs for professional visitors or groups of visitors from abroad.

School holidays - are usually during the following months:

December and first half of January
First half of April
July
First half of October

Except for the Transvaal where the holidays are in December, April and August.

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SPAIN

Area - 194,883 sq. miles; population 35 million. Spain is a peninsula with a high arid plateau in the interior, cut by mountain ranges which traverse it from east to west. The coastal plains are mostly narrow; the climate differs sharply from the hot dry south to the northern shores which are much cooler and have far more rainfall.

Spain is a constitutional monarchy with a Premier, Council of Ministers and unicameral parliament (the Cortes). After the death of Franco in 1975, King Juan Carlos' accession to the throne inaugurated a period of transitional government, directed toward democratic political and social reforms.

Only 40% of the land can be cultivated and grain and fruits are main products. Once a predominately agricultural country, Spain has been undergoing a period of rapid industrialization during the past three decades, with a corresponding rise in the per capita income. Textiles, foodstuffs, minerals and wine are important export items.

Roman Catholicism is the official state religion which exercises a powerful influence on all matters affecting the national life. Castilian is the official language; in the north Catalan, Basque and Galician are spoken also, The 52 provinces represent a richly diversified culture.

Spain has a comprehensive social insurance system covering old age, invalidity and death, health, work injury and unemployment, and providing family allowances. Under the 1966 Social Security Law, these programs apply to all workers in industry and commerce, and their dependents, and cover some 29-30 million of the population.

Illiteracy, until recently as high as 35% in the southern provinces, is rapidly decreasing, while long existing laws on compulsory schooling are increasingly being put into practice. Official recognition of the educational needs of the mentally retarded goes back to 1923 when the first national institute for the sub-normal was opened in Madrid. In recent years special education in general, and for the mentally retarded specifically, has seen a rapid development. Citizen interest in mental retardation has been spearheaded by the Federation of Associations for Protection of the Subnormal, and by national conferences, "Jornadas Técnicas de Estudio sobre el Problema de los Niños Subnormales," convened four times from 1963-1972 by the semi-official Congress of Spanish Families and the National Delegation of Associations.

In Spain, as in many other countries, the structure of government as a whole and of specific governmental organs is the result of the interplay of historical, political and cultural religious factors, resulting in a rather involved distribution of function. Increasingly in the last years, general and categorical programs have been expanded to include services for the mentally retarded; for example, social security provisions have provided increased financial assistance through various legislation, especially since 1968.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Note: At the time this Directory went to press a reorganization of Ministries was underway. The information below was received for Spain as the latest available, but some additional changes were expected.

Ministerio de Sanidad y Seguridad Social Calle Alcalá, Madrid 14	Ministry of Health and Social Insurance
Dirección General de Servicios Sociales General Sanjurjo 39, Madrid 3	Department of Social Services

Responsible for aid to homeless children, the physically handicapped, the mentally retarded, the aged and other marginal members of society. This department supervises other social entities outside the state administration and the government sponsorship of charitable foundations of a private nature which are not subject to other ministries. It will undertake the necessary steps for promoting private services in this area. The following agencies will depend on this department:

Instituto Nacional de Asistencia Social	National Institute of Social Assistance

It is expected that this Institute will combine responsibilities which previously belonged to the Instituto Nacional de Previsión (Institute of National Insurance) and the Servicio de Rehabilitación y Recuperación de Minusválidos (SEREM - Service for the Rehabilitation and Recuperation of the Handicapped)

Comisión Interministerial para la Integración Social de los Minusválidos	Joint Ministerial Commission for the Social Integration of the Handicapped
Comisión Interministerial pro Bienestar Infantil y Social (CIBIS)	Joint Ministerial Commission for Child Social Welfare
Subsecretaria de la Salud Plaza de España 17, Madrid	Department of Health

Responsible for national health policies which belonged to the former Dirección General de Sanidad of the Ministry of Interior.

Ministerio de Educación y Ciencia Calle Alcalá 34, Madrid 14	Ministry of Education and Science
Instituto Nacional de Educación Especial Atocha 108, Madrid	National Institute of Special Education

Responsible for the planning of special education, as well as for the training of teaching staff.

Dirección General de Formación Profesional	Department of Vocational Training

Responsible for all vocational training, including that of mentally and physically disabled people.

Dirección General de Programación e Inversiones	Department of Programming and Financing

Responsible for financing and equipping special education centers, both state operated and subsidized private ventures.

Instituto Nacional de Pedagogía Terapéutica	National Institute of Therapeutic Education
Instituto de Psicología Aplicada Huarte de San Juan 1, Madrid	Institute of Applied Psychology

OFFICIAL ORGANIZATIONS ON PROVINCIAL AND MUNICIPAL LEVELS

The "Diputaciones Provinciales" (provincial governing bodies) and the "Ayuntamientos" (municipal governing bodies), acting under central government supervision, provide specific services, e.g. sections for retarded children in provincial psychiatric hospitals, places in special education, health programs, etc.

PLANNING AND COORDINATION

Real Patronato de Educación Especial	Royal Board of Special Education

Coordinates the different governmental agencies with responsibility for mental retardation. It is chaired by H.R.H. Queen Sofia, whose active interest in handicapped persons has been manifested for many years.

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Professional

Asociación Española para el Estudio Científico de la Deficiencia Mental María de Guzman, 52 Madrid 13 Dr. Francisco Mendiguchia, Presidente	Spanish Association for the Scientific Study of Mental Deficiency

Organized in 1967, the Asociación is a member of the International Association for the Scientific Study of Mental Deficiency.

Citizen

Federación Española de Asociaciones Protectoras de Subnormales - F.E.A.P.S. Cristobal Bordiú 33, Madrid Dr. Jorge Jordana de Pozas, Presidente	Spanish Federation of Associations for Protection of the Mentally Retarded

The movement of parents, relatives and friends of the mentally retarded beginning locally in the late 1950's, became a strong national force with the creation in 1964 of the Spanish Federation. From the beginning the Federation and its now more than 110 provincial and local affiliates have demonstrated the feasibility of new programs for the mentally retarded, and have successfully advanced legislative and administrative proposals to implement them. The Federation is a member of the International League of Societies for the Mentally

Handicapped, and has been host to a General Assembly, as well as the 1969 Symposium on Guardianship.

Servicio Internacional de Información sobre Subnormales - SIIS
Calle Reina Regente 5
San Sebastián (Guipúzcoa)

International Information Service on Mental Retardation

An independent, non-profit institution dedicated to gathering, elaborating, and distributing materials on mental retardation on an international level. Distribution is accomplished principally through its specialized publication, "Guia Bibliografica del SIIS," ("Bibliographical Guide") and through other publications, books, pamphlets and articles. SIIS answers individual written requests for bibliographical information. Its library and archives are open to any person who wishes to consult them.

Others which include mental retardation

Asociación de Profesores Especializados en Pedagogía Terapéutica
Calle Butrón, Torre 2 / 1°C.
Madrid 32
Javier Rodriguez de Rivera, Presidente

Association of Teachers Specialized in Therapeutic Pedagogy

Sociedad Española de Psicología
Huarte de San Juan 1, Madrid II
Prof. Mariano Yela, Presidente

Spanish Society of Psychology

Sociedad de Neuro-Psiquiatria Infantil
Barcelona
Dr. Luis Folch Camarasa, Presidente

Society of Child Neuro-Psychiatry

Asociación de Pediatras Españoles
Londres 43, Madrid 2

Spanish Pediatrics Association

RESEARCH

Studies are sponsored by many of the Ministries listed above, and by the pediatric and psychiatric departments of the universities. In addition there should be listed:

Consejo Superiór de Investigaciones Científicas
Serrano 121, Madrid 6

National Council for Scientific Research

Secretariado de Educación Especial
Comisión Episcopal de Enseñanza
Alfonso XI, 4 - Madrid

Secretariat of Special Education
Mariano Garcia, Director

Instituto Nacional de Pedagogía Terapéutica
General Oráa 49, Madrid

National Institute of Therapeutic Pedagogy
Carmen de Pablo, Director

Institutc Municipal de Educación Mejia Lequerica, 21 - Madrid 4 Jose Ma. Gutierrez del Castillo, Director	Municipal Institute of Education
Servicio de Neurologia "Nicolás Achúcarro" Gran Hospital del Estado Diego de León 62, Madrid 6	Department of Neurology "Nicholas Achucarro" Dr. Gonzalo Moya, Director
Departamento de Neurología Casa Provincial de Maternidad Traversera de las Costa, 161, Barcelona	Department of Neurology Dr. C. Lamote de Grignon, Director
Departamento de Epidemiología Instituto Provincial de Sanidad de Navarra - Pamplona	Department of Epidemiology

PUBLICATIONS

Concerned only with mental retardation

"Siglo Cero," bimonthly journal of the Federación Española de Asociaciones Protectoras de Subnormales, and "Voces," in newspaper format (monthly)

"Publication Series of the Patronato San Miguel,"
Apartado correos N° 719, San Sebastián

"Bibliographical Guide on Mental Retardation," issued quarterly by the Servicio Internacional de Informatión sobre Subnormales.

Including mental retardation

"Revista de Educación"
Alcalá 34, Madrid

"Revista de Sociología Aplicada"
Cuesta de Santo Domingo 5, Madrid 13

"Revista Española de Subnormalidad, Invalidez y Epilepsie"
Servicio de Neurología "Nicolás Achúcarro"
Diego de León 62, Madrid 6

"Boletin de Estudios y Documentación del S.E.R.E.M. Minusval"
S.E.R.E.M., María de Guzman 52, Madrid 3

Information Service of the Secretariado de Educación Especial de la Iglesia
Alfonso XI 4, Madrid 14

Directory - Guía de Centros de Asistencia y Educación Especial, two volumes published in 1976 by the above Secretariado de Educación Especial and the Federación España de Asociaciones Protectoras de Subnormales, containing listings, arranged by provinces, of available educational, vocational, recreational, residential and rehabilitation services for handicapped children and adults.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - There is no clear arrangement for case finding. Potentially, the pediatric dispensaries in the provincial health departments and hospitals and those in the rapidly growing,well financed health insurance facilities will be able to fulfill much of this need. The pediatric departments have not been especially interested in diagnostic assessment of the mentally retarded, as this was considered the job of the National Board of Psychiatric Assistance (P.A.N.A.P.) through its "Centros Diagnostico y Orientación Terapéutica." The larger special schools, state and private, also provide diagnostic and assessment services, as do the provincial rehabilitation units of S.E.R.E.M. Parent counseling is an important functioning of the local associations for the mentally retarded, many of which publish informational bulletins.

Education - Special education in Spain was initiated by and received its early support from physicians rather than educators. Thus, many schools for the retarded are known as Institutos Medico-Pedagógicos. On the other hand, a professional group which has contributed much to the development of education in other countries, the clinical psychologists, has not developed to any extent in Spain, except in the area of vocational placement. In 1966, a Technical Bureau for Special Education was set up in the Department of Primary Education of the Ministry of Education and Science. While the number of children receiving special education in the ordinary school system has increased greatly over the last two decades, emphasis has remained on the mildly retarded and culturally deprived child, while many of the special schools for moderately and severely retarded children are provided by private organizations, primarily the association of parents and relatives, or the church.

Work training and employment - Most schools and classes for the mentally retarded include "arts and crafts" activities, but little realistic work training. Regular vocational education programs, for which Spain has some excellent facilities, exclude the mentally retarded. The first work training center was created in Valencia by the local association for the retarded in 1960. Other local associations followed suit. An excellent program has been developed by the Fundación Centro de Ensenanza Especial near Madrid, a private non-profit school and training institute for moderately and severely retarded young men and women, and similar programs are available in many other provinces, (Barcelona, Guipúzcoa, Málaga, etc).

Medical care - The traditional view that mental retardation falls within the field of psychiatry, along with a very pessimistic outlook ("irrecuperable" was an all-too-frequent clinical judgement)meant that there was little receptivity on the part of hospitals and medical practitioners toward mentally retarded children capable of benefiting from medical intervention. However, physical rehabilitation centers are beginning to extend their services to multiply handicapped children and adults.

Residential care - There are a large number of private institutions, some maintained by individual physicians, others by the Church. P.A.N.A.P., the National Board of Psychiatric Assistance, opened some new residential facilities in the 1960's, largely limited to custodial care. Notable residential developments are those sponsored by the Patronato San Miguel in San Sebastián, and a new institute for multihandicapped, severely retarded persons in Barcelona.

Financial assistance - The national government has provided a rather complex array of scholarship and grant assistance to retarded individuals and subsidies to non-government agencies providing services. An interesting feature is the participation of the local Savings Banks (Cajos de Ahorro) which by law must use a considerable percentage of their profits for benevolent works. Several have funded significant pioneer services in the education, vocational training and residential care of the retarded.

Recreation - Recreational activities are largely sponsored by the local associations of the F.E.A.P.S.; summer camping programs are increasingly available, many sponsored by national youth and womens organizations, "Delegación Nacionales de la Juventud y la Sección Fememina."

Research - Outside of clinical research in some of the larger medical centers, studies so far have been mostly of survey type since the scientific community as yet is not very interested in mental retardation as a vital topic for scientific inquiry.

Personnel training - There has been a qualitative and quantitative increase in courses for teachers of special education, and some short-term seminars have been given for physicians, psychologists, social workers and nurses. Inservice training for institutional aides is minimal.

OTHER INFORMATION FOR VISITORS

Information is available from

Servicio de Rehabilitación y Recuperación de Minusválidos (S.E.R.E.M.)
(Service for the Rehabilitation and Recuperation of the Handicapped)
María de Guzman, 52
Madrid 3

Servicio Internacional de Información sobre Subnormales -(S.I.I.S.)
(International Information Service on Mental Retardation)
Calle Reina Regente 5
San Sebastián

Sr. Paulino Azúa, Secretary General
Federación Española de Asociaciones Protectoras de Subnormales (F.E.A.P.S.)
(Spanish Federation of Associations for Protection of the Mentally Retarded)
Cristobal Bordiú, 33
Madrid 3

School holidays - Schools are closed in general from July 15th to September 15th; for 20 days at Christmas, and for 10 days at Easter.

SRI LANKA

Sri Lanka, an independent Republic and member of the British Commonwealth, has a population of 14.3 million. An island in the Indian Ocean 20 miles off the southern tip of India, it comprises 25,332 sq. miles with a uniform tropical climate. Its capital is Colombo. The country was previously named Ceylon, but in 1972 the traditional name of Sri Lanka (resplendent island) was resumed.

Seventy percent of the population are Sinhalese and 22% Tamali, of whom about half are known as Indian Tamalis, having been brought from Southern India in the latter half of the last century to work on plantations. Most Sinhalese are Buddhists, while the Tamalis are Hindu. The Moslem and Christian religions each comprise about 7% of the population. The languages spoken are Sinhalese, Tamil and English.

Sri Lanka is a country with a long cultural tradition, having been settled by groups coming from India about 500 B.C. It was at one time taken over by the Portugese, later by the Dutch, and became a British crown colony in 1802, having Dominion status from 1948 to 1972. The 1972 constitution vests power in a unicameral Assembly, a Prime Minister and President. Sri Lanka is a member of the United Nations.

The economy is primarily agricultural with tea, rubber and coconut products being major export items. Manufacturing is on the increase but constitutes less than 10% of the gross national product. Minerals and metals are available in abundance.

All education is free in government schools through university, and the level of literacy is above 80%, the highest in Southeast Asia. There are several schools for the blind and for the deaf, serving children from 3 to 21 years of age. However, educational needs of mentally retarded children have been badly neglected. The first specialized service, the Madiwela Home for boys, was established in 1958.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Representatives are appointed from the Departments of Social Service, Health, Education and Probation to the Executive Committee of the Ceylon Association for the Mentally Retarded. There are no institutions run by the government. The Social Services Department gives monthly maintenance grants to all non fee-levying institutions for the mentally retarded, also various ad hoc grants, if the institution maintains certain standards and is approved by the Department.

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation

Ceylon Association for the Mentally Retarded
c/o Mrs. C. V. Welikala, President
147, Vajira Road
Colombo 5

Inaugurated in 1968 by the World Health Foundation of Ceylon, the Association has a membership of interested citizens, professional workers and parents, and serves as a national advisory body to focus official and public interest on the problem, to demonstrate services and promote standards, counsel parents and encourage training of personnel. It maintains a day center; a temporary relief home and a sheltered workshop are being planned. The Association is a member of the International League of Societies for the Mentally Handicapped.

Others which include mental retardation in their program

National Council for Child and Youth Welfare
Bank of Ceylon Buildings
Colombo Fort

Maintains three residential homes (the Madiwela Home in Nugegoda, others in Kandy and Moratuwa).

Other services are sponsored by the Ceylon Fellowship Service (Prithipura Homes, Hendala, Wattala) and by an interfaith group (the Kotte Home).

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Short history - In 1957 there were no services for the mentally retarded in Ceylon, In 1958 the National Council for Child and Youth Welfare, which was already maintaining three homes for the destitute and convalescent tubercular child, started a residential unit for 25 boys below the age of 12 years. With the guidance and supervision of the psychiatrist, Dr. I.A. Senanayake, and a social worker, this home developed a strong program which resulted in publicity that spurred the government and the public to assist the cause of the mentally retarded.

A day center was opened in 1962 by an interfaith group but it failed because of lack of transportation; three years later the Prithipura Home, serving delinquent and destitute boys, instituted two homes for mentally retarded children. From 1965 on other homes and day centers were opened, providing mainly simple care. In 1969 there were three day centers, a rehabilitation and training center (the Madiwela Home) six residential care units (3 also including children with other handicaps). At present, about 500 persons are being served.

Case finding, diagnosis and assessment, consultation to parents - Most referrals are made through the government Child Guidance Clinic in Colombo, the Probation Department, and the Social Services Department. Diagnosis is made by psychiatrists in the Probation Department, except in the case of the Madiwela Home which has its own psychiatrist. At the Madiwela Home a final-year trainee from the School for Social Work does case visiting and works with parents and the institution. Teachers meet the parents at least twice a year to discuss problems. The Ceylon Association also provides consultation to parents.

Education - There are no specialized education programs, except at the Madiwela Home and the two day centers which use Montessori methods and training in self care and socialization. It is expected that some classes under the regular school system will be started in the near future.

Work training and employment - The Madiwela Home trains boys in agricultural work, carpentry, poultry-keeping, weaving, machine sewing, housework, and gets contracts from firms for bag-making and simple assembly jobs. Simple academic skills, use of money and social training are stressed. Employment prospects are bleak, but it is hoped to initiate sheltered workshops to aid in this respect.

Medical care - Government sponsored hospital and dispensary services throughout Sri Lanka are free.

Financial assistance - Except in fee-levying institutions, all others (if standards are approved) receive a monthly maintenance grant from the government amounting to about 15¢ per child per week. The deficiency is made up from public subscription.

Recreation - Most institutions take the children on excursions, to films and other entertainments. At the Madiwela Home there is a Scout Troop for the boys living there.

Personnel training - Various professionals, such as doctors, nurses and teachers, receive some instruction in mental retardation as part of their overall curricula. The Association has provided lecture courses and seminars for teachers and parents. In 1975/77 the British Council provided the services of an educational consultant for training of school personnel, both through in-service methods and a 1-year program at Colombo University.

OTHER INFORMATION FOR VISITORS

The Ceylon Association for the Mentally Retarded will provide information for visitors.

School holiday periods - Mid-April to May; children usually go home for at least two weeks during this period, which is the Sinhalese New Year and Wesak season. Also, 2 weeks in August, 2 weeks during the December holidays, starting school on about January 5th.

SWEDEN

Area - 173,378 square miles; population - over 8 million; government - constitutional monarchy with unicameral parliament (Riksdag). Sweden's relatively homogeneous population (except for about 8% foreign-born persons and small minorities of native-born Finns and Lapps), her long history of freedom and neutrality, her agricultural and industrial efficiency have resulted in the well known high Swedish standard of living. A basic concept of the right of the individual to live in dignity and security underlies the broad, tax-supported social welfare system, through which about 20% of the Gross National Product is redistributed. It includes subsidies for medical care and certain welfare services, cash benefits from health insurance, unemployment, old age and disability insurance, and various other special provisions. If public costs for education are added, the figure exceeds 25%. Costs for special services for the retarded amount to about 2/3 of 1% of the GNP.

Sweden participates actively with the four other Nordic countries in many areas of mutual interest (see item under Regional Organizations on the Nordic Association on Mental Retardation, NFPU); her international involvement, especially in aid to developing countries, is generous.

The first special school for the mentally retarded was founded in 1886 and led to the establishment of many provincial boarding schools by the turn of the century; most residential facilities, at first under voluntary auspices, have now become official responsibility. Almost all special services for the retarded are now provided by the 23 counties and 2 municipalities, under the Mental Retardation Service Boards appointed by the elected County Councils.

The law of 1954 and the even more comprehensive law of 1968 define the rights and services for the mentally retarded to be carried out by the counties. A government committee, appointed in 1977, is studying the problem of whether conditions for the retarded can be further improved through integration of the special law in the general legislation for education, welfare and medical care. Implementation is supervised, stimulated and, to some extent, subsidized by the following two central government agencies:

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Skolöverstyrelsen 108 42 Stockholm	National Board of Education Lennart Wessman, Inspector Special Schools for the Mentally Retarded, Dept. of Planning
Socialstyrelsen 106 30 Stockholm	National Board of Health and Welfare Karl Grunewald, M.D., Head Bureau for Mental Retardation Services

Socialstyrelsen operates under the auspices of Socialdepartementet (Ministry of Health and Social Welfare) Fack, 103 20 Stockholm, and so does Skolöverstyrelsen with regard to its activities for the mentally retarded. Skolöverstyrelsen is responsible for educational matters, while Socialstyrelsen supervises other services. Employment services and vocational rehabilitation are organized by:

Arbetsmarknadsstyrelsen 171 99 Solna	National Labor Market Board Seved Eriksson, Head Vocational Rehabilitation Division

This agency works under the auspices of Arbetsmarknadsdepartementet (Ministry for the Labor Market).

Statens handikappråd Kungsgatan 48 602 20 Stockholm	State Council for the Handicapped

The Council has advisory coordinating functions and includes representatives for the handicapped, for central state agencies and for federations of County Councils and municipalities.

Handikappförbundens Centralkommitté (HCK) David Bagares gata 3 118 83 Stockholm	Central Committee of Associations for the Handicapped

HCK represents 21 national organizations for different groups of handicapped people. There are groups corresponding to both the above organizations in all the counties and many municipalities.

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Professional

The following professional groups have no permanent headquarters and therefore are listed without addresses:

Svenska särskolornas lärarförening	Union of Teachers for Retarded Pupils
Vårdchefernas förening	Union of Supervisors of County Boards of Mental Retardation Services
De Enskilda anstalternas förbund	Association of Private Institutions

Citizen

Riksförbundet för Utvecklingsstörda Barn,Ungdomar och Vuxna (FUB)
(National Association for Mentally Retarded Children, Youth and Adults)
Sibyllegatan 7 (Postadress: Box 5410)
114 84 Stockholm

The Swedish Association (FUB) was founded in 1956, four years after the first local group had been initiated. With 115 local branches and a membership of 19,000, FUB is one of the strongest parent sponsored organizations in Europe. FUB today has very strong and close ties to both the executive and legislative branches of government. It receives certain financial support from central and local governments, but has been able to keep its independence as a consumer pressure group. FUB has played a major role in the creation of the International League of Societies for the Mentally Handicapped.

Other national voluntary organizations which include mental retardation in their program

Svenska Scoutförbundet Igeldammsgatan 22, Fack 100 28 Stockholm	Swedish Scout Association (Boy Scouts and Girl Guides)
Riksförbundet för Rörelse-hindrade Barn och Ungdomar David Bagares gata 3 111 83 Stockholm	National Association for Children and Young People with Locomotor Handicaps
Rädda Barnens Riksförbund Artillerigatan 59, Fack 102 40 Stockholm	Save the Children Federation
Svenska Röda Korset Artillerigatan 6, Fack 104 40 Stockholm	Swedish Red Cross

RESEARCH

See item under BRIEF DESCRIPTIVE NOTES

ALA-stiftelsen Sibyllegatan 7 114 51 Stockholm	ALA Foundation, FUB
Project Mental Retardation Ulleråkus Sjukhus 750 17 Uppsala	

PUBLICATIONS

Journals

FUB-Kontakt	Quarterly, published by Riksförbundet FUB

Psykisk Utvecklingshämning
Karl Grunewald, M.D., Editor
Seglarvägen 34
181 62 Lidingö

Quarterly published by the
Nordic Ass'n on Mental
Retardation

Directories - Address listings of facilities are available from the two responsible State agencies in mimeograph form.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - There are pediatric departments, mostly several, in all counties, and large networks of health centers for mothers and children. Virtually all children receive repeated health examinations during their first two years and a large majority during subsequent pre-school years. A multiphasic screening program for all 4-year-olds is being developed, but its implementation is not yet complete. District nurses, pre-school and welfare staff as well as teachers participate in the case finding work. The infant mortality rate (below 10 per 1,000) is the lowest in the world, and the incidence of certain physical handicaps often associated with mental retardation (e.g. cerebral palsy), has also been reduced. However, about half the cases of mental retardation do not become apparent before the compulsory school period, which emphasizes the need for still more case finding work and for early intervention for all children at risk for intellectual impairments. The first information to parents about handicap in a child still has shortcomings but is improving. More often than formerly it is followed by systematic consultation services which may include special training of parents, together with emotional and therapeutic support. Parents' societies (FUB) provide additional consultation. Together with the Swedish Scout Association, they have initiated a network of toy lending projects (Lekotek), and have induced several local authorities to participate in this development.

Education - Sweden is gradually implementing an ambitious general program for child nursery and pre-school services. Handicapped and particularly, retarded children, have special rights to such services, for which both separate and integrated facilities are available. School attendance is compulsory for all retarded children between 7 and 21, sometimes 23. Implementation is virtually complete at the primary school stage (with a 10-year curriculum, not 9-year as for most other children). Steps are being taken to remove remaining shortcomings, e.g. for severely retarded children considered unable to attend a class and receiving only a few hours a week of training individually or in small groups; and for severely retarded children with associated hearing and sight handicaps. Residential special schools are disappearing, and even day schools are being transformed into special classes in ordinary elementary schools. At the secondary level there are special vocational schools, with a 4-year curriculum, for a large majority of the retarded adolescents, and efforts are being made to provide "activity training" for the minority considered unable to benefit from vocational training or even from simple work training. There is a beginning of a trend to integrate these special vocational schools in ordinary secondary schools which have large and diversified resources for vocational training but have done little, so far, to serve pupils with general intellectual impairments.

Work training and employment - The State Employment Service has special vocational rehabilitation resources for persons with handicaps, collaborates with vocational guidance specialists in the school system and with the National School Board, which operates various forms of prevocational and vocational training for handicapped adults, including persons who are retarded or otherwise intellectually impaired. In addition, several other forms of adult education are provided, with special subsidies for handicapped persons. Many mildly retarded persons get jobs on the open market. There are several forms of sheltered or semi-sheltered work; the State pays 75% (sometimes 90%) of the total wage cost (including payroll taxes) during the first year and lower amounts (down to 25%) during the balance of a 4-year period, that can be extended to any private or public employer giving a job to a handicapped person. Also, mentally retarded adults have a special right to get occupation at a day center if no real work is available for them. Nevertheless, more than 20% of all retarded adults known to public authorities had neither a job nor any other meaningful occupation at the end of 1976, but plans have been adopted to reduce or even wipe out that figure, particularly through provision of more day centers with occupation.

Medical care - Free medical and dental care is provided both within the special system of services for the retarded and through use of the general medical care service. However, it is often difficult to recruit and retain good medical staff for the special service, and other medical staff do not always know enough about how to take care of retarded persons. Technical aids of all kinds are free of charge, but it is often more difficult for retarded persons with additional physical handicaps than for other persons with the same handicaps to get aids that really suit them, and also more difficult to obtain other services they need from medical specialists. Mostly, however, conditions are fair by international standards and are improving.

Residential care - A large and growing majority of all retarded children and adolescents and 1/3 of the adults live with their parents or in other private family homes, getting various forms of financial support (see below), often also domiciliary services which, however, are insufficient in many cases. A small and shrinking minority of children and adolescents and more than 40% of the adults live in residential institutions. Plans have been adopted to raise the percentage of children living with their parents and to offer integrated living in small group homes or even more independent living in "own apartments" to the majority of the adults within 10 years. A few residential institutions have more than 300 places, but most have less than 75 residents, and the large institutions are being reduced in size. The institutions include 6 special hospitals for a small minority of complicated cases which, however, are being transferred rapidly to ordinary "care homes," or to small units for intensive treatment. The average ward in an institution provides for less than 10 retarded persons with about 1.5 persons per bedroom, but it is being urged that they be reduced to 4-6 persons with single rooms for all who want it.

Financial assistance -Parents having much extra work because of the handicap of a child receive an allowance, subject to taxation, of over Kr. 16,000 from the social security system, often also additional tax-free amounts from the County Councils. Those over 16 years often get disability pensions of over Kr. 16,000, usually also rental subsidies if they are living with their parents or on their own, and parents may get additional amounts as compensation for their work. The total sum may exceed Kr. 40,000 in many cases involving adults, and most of it is free of direct taxes; means tests are seldom applied.

Recreation - Both FUB and other voluntary organizations, and public authorities organize a wide range of leisure time activities for retarded persons, such as publicly supported study circles, domestic and foreign vacation trips, club activities, summer camps, "handicap sports" etc. Yet it is insufficient, particularly for those who are severely retarded, multiply handicapped, or living in rural areas.

Research - A growing number of research projects in mental retardation are supported by State and private funds. The ALA Foundation, Stockholm, sponsored by FUB, is doing work on psychological and other aspects of mental retardation. One of the many studies it has presented concerns the organization of multi-disciplinary team work; another contains an historical critical survey of residential care. It has collaborated on an architectural study about how to adapt group homes to varying needs, also for persons who are severely retarded or multi-handicapped. Projekt Mental Retardation at Ulleråker Hospital, Uppsala has published a number of concrete psychological studies, often evaluating the results of different forms of modern services. The National Board of Education supports a number of pedagogical and psychological studies, including one on the personality development of retarded persons and their need of emotional support and identification. Other research is carried out in various departments at the universities of Uppsala, Göteborg, Stockholm, Lund and Umeå.

Personnel training - There are special training facilities for teachers, home superintendents, work and recreational supervisors, attendants in care homes and other specialists. Yet, there is still a shortage of trained staff.

Planning - The Boards for Special Services for the Retarded of the County Councils, together with the two central government agencies mentioned, are jointly responsible for the drafting of plans for these services, including 5-year plans that must be made public. Some of the County Councils have published ambitious 10-year plans aimed at more integration and more resources.

OTHER INFORMATION FOR VISITORS

The above listed central government agencies provide assistance in making arrangements for visits. FUB may also be contacted.

School holidays - Easter Week, the periods June 10 to September 1, and December 23 to January 10.

SWITZERLAND

Area - 15,941 sq. miles; population - 6 million. Switzerland is a Confederation of 25 cantons and half cantons, originating from the pact of 1291. Each canton is sovereign and has its own Departments (corresponding to Ministries) of Education, Health, Labor, Finance, etc. The national executive, or Federal Council, has 7 members who are elected by the Federal Assembly for a 4-year term, forming a "gouvernement collegial" which elects one member as president. Each Federal Councillor heads one of the 7 government departments.

There are four national languages: German (70%), French (19%), Italian (10%) and Rheto-romanche (1%); the first three are official languages. Approximately 48% of the population is Protestant, 49% Catholic, and 1% other denominations.

In 1841 the world's first known effort to provide "therapeutic" care for a group of severely deficient persons in a separate residential setting was initiated by J.J. Guggenbühl at Abendberg near Interlaken. While Swiss residential homes for children have long had a reputation for good care, and day school programs for slow learners and the mildly retarded began in cities before the end of the 19th century, it was only in the 1960's that special needs of the adult and the more severely retarded of all ages have been recognized. (An exception was the day school program started in Zurich 30 years ago by Maria Egg-Benes and Luise Rossier.)

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Federal

Office fédéral des assurances sociales
Bundesamt für Sozialversicherung
Effingerstrasse 33
3003 Berne

Federal Office for Social Insurance
(Department of Interior)

Carries the main public responsibility on the national level for rehabilitation in Switzerland both for the physically and mentally handicapped. The Federal Office for Social Insurance acts as supervisory authority for the Federal Disability Insurance Act, which took effect in 1960. This Office has its own regional bureaus for vocational rehabilitation, while cantonal boards examine the individual cases and make decisions regarding appropriate rehabilitation measures and pensions for the handicapped. The Federal Office is a very dynamic institution which carries great responsibility for the mentally retarded, as it is the only federal office in charge of this problem.

Cantonal departments

Due to the federal structure of the country, there are no ministries of health or education in the central Federal government. Each Canton has its own Department of Education, Health or Labor, located in the capital of the canton and with slightly different titles, in general being called:

For education: Département de l'instruction publique or
Kantonal

For health: Département de la prévoyance sociale et de
la sante publique, or
Kantonal

(It is suggested that persons from abroad wishing to contact one of these departments request the address from the Swiss representatives in their country.) There is a coordinative body between these cantonal departments, called "Conference of the Heads of Departments."

National planning and coordination

Commission suisse d'etude pour les problemes des handicapés mentaux
Schweizerische Kommission für Probleme der Geistigen Behinderung
Mr. Jean Wahl, Chairman
c/o Postfach Pro Infirmis, 8032 Zurich

Swiss Commission for the Study of Problems of the Mentally Handicapped

This is a semi-public national coordinating body of represntatives of the Federal Office for Social Insurance, the various cantonal Departments interested in the mentally retarded, and representatives of professional and voluntary bodies; it has 10 working sub-committees concerned with specific aspects of the problem. Mr. Wahl, the Chairman, is President of the Federation of Parents' Associations.

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Professional

Association suisse en faveur des arriérés (ASA)
Schweizerische Heilpädagogische Gesellschaft (SHG)
Secretariat ASA/SHG, case postale 225
3000 Berne 13

Swiss Association for the Mentally Retarded

Founded in 1889, this organization of professional workers had, until the 1950's been primarily concerned with community programs for the mildly retarded child, residential services for all degrees of mental deficiency, vocational training, and the training of personnel. Its regional groups have since then increasingly supported regional programs for moderately and severely retarded children, sheltered workshops, hostels, and were the first to create educational services for children of 1 to 6 years with travelling teachers who see the child at home.

Citizen

Fédération suisse des association de parents de handicapés mentaux
Schweiz. Vereinigung der Elternvereine für geistig Behinderte
Federazione Svizzera delle associazioni di famiglie di ragazzi mentalmente insufficienti

Swiss Federation of Associations of Parents of the Mentally Handicapped
Central Secretariat:
P.O. Box 191
2500 Biel 3 (Bienne)

Founded in 1960, the Federation unites 51 cantonal or regional associations composed of 6,000 parents and 20,000 professionals and interested citizens. It has played an important role in providing and obtaining services through its member organizations, in contacts with official and professional agencies, and in education of the public. The Federation was founding member of the International League of Societies for the Mentally Handicapped, and one of its pioneer members, Mme. Y. Posternak was ILSMH President 1970-1974.

Other national voluntary organizations which include mental retardation

Schweiz. Vereinigung Pro Infirmis Association suisse Pro Infirmis Postfach 129 (Feldeggerstrasse 71), 8032 Zurich	Swiss Association for the Handicapped "Pro Infirmis"

A long established "umbrella" organization uniting in its membership professional service organizations for the various categories of handicaps, Pro Infirmis supports a nationwide network of special agencies (services sociaux) with full time and specialized social workers. More than 1/3 of their clients are parents of mentally handicapped children, or retarded adults. It is a member of Rehabilitation International. Among the members of Pro Infirmis are:

Fédération suisse pour l'intégration des handicapés dans la vie économique (FSIH) Schwiz. Arbeitsgemeinschaft Eingliederung Behinderte in die Volkswirtschaft (SAEB)	Swiss Federation for Integration of the Disabled in the Economy Brunaustrasse 6 8002 Zurich
Union suisse des institutions pour handicapes Schweiz. Verband von Werken für Behinderte	Union of Sheltered Workshops for the Handicapped Brunaustrasse 6 8002 Zurich
Association des séminaires de pédagogie curative Verband der heilpädagogischen Seminarien	Union of Curative Education Seminaries Alpenstrasse 8/10 6004 Luzern
Fondation suisse en faveur de l'enfant infirme moteur cérébral Schweiz. Stiftung für das cerebral gelähmte Kind	Foundation for Cerebral Palsied Children
Verband anthroposophisch tätiger Heilpädagogen und Institutionen in der Schweiz Sonnenhof, 4144 Arlesheim	Association of Anthroposophic Curative Education Teachers and Institutions in Switerland

RESEARCH

Research on various aspects of mental retardation is carried on in all universities and in the large hospitals, especially the children's hospitals. The Institut für Hirnforschung in Zurich has a major interest in mental retardation.

PUBLICATIONS

Pro Infirmis Postfach 129, 8032 Zurich	Bimonthly journal concerned with all categories of handicapped persons
Pages romandes de l'ASA Case postale 225, 3000 Berne 13	An independent French-language publication edited by ASA, quarterly
Schweizer Erziehungs-Rundschau Revue suisse d'education Höhenweg 60, St. Gallen	SHG/ASA contributes articles on mental retardation to this monthly
Heilpädagogik Löwenstrasse 5, 6000 Lucerne	A quarterly journal concerned with special education in all fields
Leur Voix and Appell P.O. Box 191, 2500 Bienne 3	These quarterlies, in separate French and German editions, are published by the Swiss Federation of Parents

The Office fédéral des assurances sociales publishes a monthly paper, (Effingerstrasse 33, 3003 Berne), "RCC" in French, "ZAK" in German.

Directory - Rehabilitations Einrichtungen(Institutions de réadaptation) is a listing of medical facilities, special schools, vocational training centers, sheltered workshops, hostels and residential homes for the handicapped, published by Pro Infirmis.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Only in the larger cities are there specialized diagnostic centers which are specially prepared to deal with the mentally retarded. In general, children's hospitals, specialized physicians for children, the widely spread infant welfare services with regular medical consultations for mothers, and school medical officers and psychologists (assessing school-age children) do the main case finding. Opportunities for specialized consultation to parents are not yet sufficient, although the social services of Pro Infirmis, the staff of many day schools, and local parents' associations as well as the travelling teachers are prepared to give services.

Education - Until the 1950's, Swiss schools accepted children of mild and moderate retardation in the same schools with sufficient specialization in different grades only in the larger cities. Based primarily on the experience of the "Heilpädagogische Hilfsschule" of the city of Zurich Schools Department, and the still older institutions under anthroposophic direction, special schools for moderately and severely retarded children have been created by the school authorities in all cantons.

In order to help parents in their educational tasks and to begin the specialized training as early as possible, the Association suisse en faveur des arriérés and several parents' associations employ travelling teachers who visit families with retarded infants up to kindergarten age, and provide minimum special education to school-age children living in isolated mountain valleys.

Work training and employment - Vocational training centers and sheltered workshops for the mentally retarded have been established in increasing numbers; however, as yet not all of those persons needing this type of training and work opportunity can be accommodated. There are over 260 sheltered workshops, many serving a mixed clientele of physically and mentally handicapped persons.

Medical care - Switzerland has a high standard of medical care but, until recently, this was not reflected in the area of mental retardation where there was only limited interest in the health problems of the mentally retarded. Most hospitals have introduced a PKU prevention program which has undoubtedly contributed to increasing the interest of physicians.

Residential care - Nearly 130 years ago the first attempt to give special care and training to the severely retarded in a residential home was done by Guggenbühl near Interlaken. There are many institutions at present, purposely kept small and seldom with more than 100 residents, mainly under private and church auspices. Educational and vocational training is emphasized, although for the more severely handicapped this is generally still in beginning stages, and programs for retarded adults are particularly lacking, especially for those who are severely handicapped.

Hostels for retarded adults in sheltered employment have been established within the community in Zürich, Basle and other towns, and several residential centers, mostly under anthroposophic direction provide family living and employment for moderately and severely retarded young adults. An example is "Aigues Vertes" in the Canton of Geneva, run by members of the Camphill movement in cooperation with the Geneva Parents' Association.

Financial assistance - Since 1960 the Swiss Invalidity Insurance System has pioneered in giving financial assistance to families of the mentally retarded, to the retarded person himself, and in providing subsidy to agencies rendering what can be considered preventive services. (These include programs for education and training.) Rehabilitation is looked upon as a vital secondary preventive service.

Recreation - Special programs, clubs, vacation colonies and camps (both summer and winter) are sponsored by special day schools, residential centers and the parents' associations.

Research - World famous for his contributions to better understanding of cognitive development in early childhood is Professor Jean Piaget and his assistant, Dr. Bärbel Inhelder, who has applied Piaget's theory to the area of mental retardation at the Institute of Educational Sciences, University of Geneva. A certain amount of research in mental retardation is carried out in university medical schools.

Personnel training - Specialized training courses for teachers and for "éducateurs" (child care workers) are available in Zürich, Fribourg, Lucerne, Lausanne, Zetzwil and Geneva, which also has a training course for sheltered workshop staff. The Universities of Geneva and Zürich offer courses in mental retardation.

Planning and coordination - on the government level by the Swiss Commission for Problems of Mental Retardation established in 1967; through its 10 task forces (subcommittees) the Commission has concentrated on fact finding, and has made recommendations in such areas as training and community services for the very young retarded child. Another Commission report on the place of the mentally retarded in Swiss legislation provides a very complete study and recommendations. (Printed only in German.)

OTHER INFORMATION FOR VISITORS

Requests for information and assistance in planning visits can be made to:

Pro Infirmis
Postfach 129
8032 Zurich

Swiss Federation of Parents of the Mentally Handicapped
P.O. Box 191
2500 Biel 3 (Bienne)

or the above listed organizations.

School holiday periods - vary from canton to canton but generally occur from about December 20th to January 10th; Easter; July and August.

THAILAND

Thailand is a Southeast Asian tropical country about the size of France (200,148 square miles). Its 41.3 million people are primarily of Thai stock and rural. There are minority groups of urban Chinese, Malay-speaking Moslems in the south and Vietnamese and hill tribes in the northwest and north.

The Kingdom of Thailand (formerly Siam) is the only Southeast Asian country never under a colonial power. Modernization began in the late 19th century and since 1932 it has been a constitutional monarchy governed by a King, Prime Minister, Cabinet and Assembly. In the last 2 decades there have been periods of unrest and military rule. Administratively the country is divided into 71 provinces, further subdivided into districts, towns and villages.

The economy has rested largely on agriculture (rice and teak are main exports) but is becoming increasingly diversified. Bangkok, the capital, is a modern city with a population of almost 4 million. An annual population growth of 3% somewhat offsets the 7% GNP annual increase; a concerted effort has been launched by the government to improve standards of health, education and economic security and an unusually large part of the national budget goes to economic development and education. Schooling is compulsory between ages 7 and 14; the literacy rate is high. There are 12 universities, many training colleges and vocational schools. About 94% of the people are Buddhist. The language is Thai, related to Sanscrit and Pali. English is the official second language.

The first special program for the mentally retarded was the establishment of a training school and hospital (residential institution) by the government in 1962. It is still the only such specialized service in the country.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Public Health
Devavej Palace, Bangkok

Department of Medical Services, Mental Hospital Division
Pan-Ya-On Training School and Hospital
for the Mentally Retarded
(Institute of Mental Deficiency)
4737 Din Daeng Road
Bangkok 4, Phya Thai   Dr. Rosjong Dasnanjali, Director

Ministry of Education
Rajdamnoen Road, Bangkok 3

Department of Elementary and Adult Education
Supervisory Unit, Mrs. Sathaporn Suvannus, Chief
Division of Special Education

Ministry of the Interior
Bangkok

Department of Public Welfare

VOLUNTARY ORGANIZATIONS

Voluntary organization with primary concern for the mentally retarded

Parents' Association for the Retarded (PAR)
c/o Pan-Ya-On Training School and Hospital
4737 Din Daeng Road, Bangkok 4

This Association was founded in 1975 and is a member of the International League of Societies for the Mentally Handicapped. While its primary concern at first has been with the program at Pan-Ya-On Training School and Hospital, a wider concern is basic to its planning and its constitution. It cooperates with the Foundation for the Retarded, a charitable group, which has aided the Training School and Hospital in fund raising.

Other organizations which include some concern for the mentally retarded

National Welfare Council of Thailand
Mahidol Building, Rajavithi Road, Bangkok

Foundation for the Welfare of the Crippled
Mahidol Building, Rajavithi Road, Bangkok

Foundation for the Blind
420 Rachavithi Road, Bangkok

Foundation for the Welfare of the Deaf
77 Rama V Road, Dusit, Bangkok

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Initial case finding and diagnosis may be through general practitioners, maternal and child health centers, midwives and public health nurses, or child guidance centers. School age children may be referred to a child guidance center or directly to the Pan-Ya-On Institute, which, since 1962, has provided specialized diagnostic and assessment services, together with parent counselling. About 500 new cases are seen annually.

Education and vocational training - The first classes for slow learners (IQ above 75) were organized in 1957 by the Department of Elementary and Adult Education in a few schools in Bangkok and the suburb of Thonburi. There are still only a limited number of special classes for them or for mildly retarded children in the public schools. Efforts are made to give retarded children in ordinary classes special attention by the teacher and educational administrator, at the same time encouraging as far as possible their assimilation in the normal groups and discouraging the use of special classes as problem dumping grounds. School attendance has not been made compulsory for more retarded children and as yet services are limited to the Rajanukul School, a part of the Pan-Ya-On Institute, which has 10 classes on pre-school and elementary levels, for 150 residents and 50 day pupils. In addition to some basic academic teaching, emphasis is on every day living experiences. Activity programs include sewing, painting, ceramics, woodwork, handicrafts, metal work and music. An effort is made to help adolescents and adults attending on a day basis to develop work habits and skills through actual work projects. The teachers of the School are supplied and trained by the Department of Elementary and Adult Education. In 1970, 5 small homes for 5 each were opened for young men being trained in agricultural work.

Medical care at the Institute is provided by the director and 5 permanent physicians who visit the hospital ward daily, look after the health of the residents and conduct daily out-patient clinical services. The Institute's staff of professionals consists also of 2 dentists and a dental hygienist, 21 nurses (also 16 nurses aids), 3 occupational therapists, 2 social workers, and the School staff of 10.

Residential care - In 1969 the Institute had approximately 300 residents ranging in age from 7 to 18 years, and a staff of 169. There are 2 dormitories for boys and 2 for girls, and a special ward for severely physically handicapped residents. A group of 14 to 18 year old boys have lived on the grounds in a half-way house as an experimental project. The Department of Public Welfare provides a few homes for retarded children, several of whom attend the Pan-Ya-On Training School.

Financial assistance - The expense of care at the Institute is paid mostly by the government unless the family is able to share in the cost. Whenever possible the family is expected to provide clothing and educational materials. Special schooling in the regular schools is free, although all children are expected to pay for school materials and the daily meals. There are some funds for aid to those unable to do so.

Personnel training - Courses are given by the Department of Education for preparation of special class teachers; in-service training is provided for personnel at the Institute. A definite number of hours are devoted to instruction on general mental health topics in the training of doctors, nurses, midwives and social workers, but in general, the need for specialized personnel is considered an acute problem.

Planning - Some short-term consultation has been available by United Nations and non-governmental agencies.

OTHER INFORMATION FOR VISITORS

Requests for information and visits may be directed to:

Dr. Rosjong Dasnanjali
Pan-Ya-On Training School and Hospital
55 Din Daeng Road,
Bangkok 4, Phya Thai

School holiday periods - are from mid-March to mid-May. There are 3 main seasons: March/May, hot; June/October, rainy; November/February, cool.

TUNISIA

The area of Tunis is 63,387 square miles and the population nearly 6 million; 30 to 35 percent are urban dwellers and 45 percent children below the age of 15 years. The infant mortality rate is 114 per 1,000. Formerly a French protectorate, Tunisia was declared a republic in 1957; in 1974 President Bourgiba was named president for life. The official language is Arabic, but French is still widely used and taught in the schools. Agriculture is the backbone of the economy although handicapped by inadequate water supplies in many parts of the country. There is considerable unemployment, but despite the economic problems, considerable progress is made in the health, education and welfare fields. For example, women may vote; education is not compulsory, but it is free at the primary level and 95% of this section of the population is enrolled in primary education. Social security is provided for all employees in the public sector and for 80% of those privately employed.

Interest in the welfare of the mentally retarded appeared in 1966, the year when the national parents association, U.T.A.I.M., was founded. This body was recognized in 1972 as an "etablissement d'utilite publique."

The official responsible body is the Ministry of Social Affairs, whose participation centers around the provision of personnel, financial assistance, health care, and training.

GOVERNMENT AGENCIES WITH RESPONSIBILITY FOR MENTAL RETARDATION

Secrétariat d'état aux affaires sociales Rue Bab Binat Tunis	Ministry of Social Affairs
Service de l'action sociale	Social Welfare Services
Service des handicapés et de la réadaptation	Rehabilitation and services for the handicapped
Service de l'enfance	Children's Services
Assurance Sociale	Social Security
Secrétariat d'état à l'éducation nationale Rue Bab Binat Tunis	Ministry of Education
Direction Pedagogique	Educational Research

VOLUNTARY ORGANIZATION

With primary concern in mental retardation
Citizen and professional

L'Union Tunisienne pour l'aide aux insuffisants mentaux (U.T.A.I.M.) 5, rue Khemaïs Ternane Montfleury, Tunis	Tunisian Union for Aid to the Mentally Retarded

Founded in June 1966, U.T.A.I.M. is a parent-sponsored organization which has a highly qualified advisory committee including physicians, educators, clergy and public relations advisors. It became a member of the International League of Societies for the Mentally Handicapped in 1970 and in 1975, organized the first Regional Arabic Conference on Mental Handicap, under the asupices of the International League of Societies for the Mentally Handicapped, attended by government, professional and voluntary leaders from 9 Arab countries. U.T.A.I.M. publishes an annual report of its activities.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to aprents - These are provided through maternal and child health services, private physicians and general hospitals. U.T.A.I.M. provides family counseling to the extent possible.

Education - Special education for retarded children is being provided in some of the government homes for dependent children, and in some private and government schools. For example, U.T.A.I.M. assists 12 centers serving one year olds through adults. In the 10 centers for children, special education and pre-vocational classes are held.

Work training and employment - A pilot project is being carried on under the Rehabilitation Service of the Ministry of Social Affairs to provide vocational training for mildly retarded boys between 12 and 16 years of age. In the 2 adult U.T.A.I.M.-assisted day centers, vocational training is provided.

Medical care is provided in various hospitals and by the several projects serving handicapped children.

Residential care - Under the Children's Service of the Ministry of Social Affairs, the government has an extensive system of orphanages and "Bourguiba villages" where some of the children are retarded, as is to be expected in a random sample of the population. In 2 of these special education is being provided:

Foyer d'enfants Salaheddine Bouchoucha
Kassar Said

Centre d'Accueil de Fatah
Bizerte

Financial assistance - Some aid is available through the central government social security program.

Recreation - U.T.A.I.M. sponsors a weekly recreation club program for mentally retarded children, and summer camps have been started.

Research is being undertaken in connection with the vocational training project of the Ministry of Social Affairs' Rehabilitation Service. A survey has been made by the Research Department of the Ministry of Education to ascertain the number of children with physical or mental handicaps in the elementary schools, supplemented by information from the Social Services on the number of handicapped above and below elementary school age. Another study concerns the prevention of mental retardation with socio-economic causes.

Personnel training is primarily on an in-service basis. Some teachers have had short term training in Switzerland and France. The Ministry of Social Affairs takes responsibility for training.

Planning in this special area has not yet been possible on a national level. U.T.A.I.M., with the support of its Honorary President, S. E. Monsieur Mondher Ben Ammar, Secretary of State for Youth, Sports and Social Affairs, has increasingly undertaken the responsibility of bringing information on mental handicap to the public through the news media and television. In this it has the support also of the National Union for Tunisian Women which acts as a pioneer in setting up social and child welfare institutions and in interpreting legislation to the public.

OTHER INFORMATION FOR VISITORS

Assistance in planning visits or obtaining information may be requested from:

L'Union Tunisienne pour l'aide aux insuffisants
mentaux (U.T.A.I.M.)
5, rue Khemaïs Ternane
Montfleury, Tunis

School vacation periods:

Winter - approximately December 23 to January 3

Spring - one week late March or early April

Summer - mid-June to mid-September

TURKEY

Turkey is a republic located partially in Europe and partially in Asia, bounded by Bulgaria, Greece, the U.S.S.R., Iran, Iraq, Syria and the Black, Aegean and Mediterranean Seas. Its population, of which 50% are less than 20 years old, is largely concentrated in Ankara, Istanbul and Izmir. It has an area of 301,380 sq. miles, the capital is Ankara, and the largest city and industrial center is Istanbul. The people are Moslem (98%), generally of the Sunni sect, and speak Turkish (91%), Kurdish (7%), Arabic and other languages. About 41% of the population is engaged in farming (tobacco, cotton, fruit and nuts) and industries include iron, steel, textiles, olive oil production. The country is hilly in Europe and has two plateaus with extreme temperatures in Asia, while the Aegean and Black Sea coasts can suport considerable vegetation.

A President is elected by a bicameral legislature for one 7-year term. There have been planned economic development periods of 5 years each since 1963, and a law promulgated in 1961 provided for the nationalization of all health services within 15 years. Social insurance for wage earners is administered by the Workers' Social Institution of the Ministry of Labor, but social welfare services are still in the beginning stages, and education and health institutions are primarily based in larger population centers. Education is free and compulsory at the elementary level, but because of limited availability, only about 60% of children 5 to 14 years old attend school. Higher public education at secondary, vocational, technical and university levels is also free, but sometimes openings are limited or the cost of living away from home is prohibitive. There are about 7 colleges and universities.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Education
Department of Special Education
Ankara

Ministry of Health
Ankara

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation
Citizen

Geri Zekâli Çocuklari Koruma Derneği - Genel Merkezi
Etlik Kuyuyazisi Cad. Kivrimli Sok. No. 27
Ankara

Association for the Protection of Mentally Handicapped Persons, Ankara

This organization was started in 1965 by interested parents.

Including mental retardation

Turkish Mothers' Association
Koska Caddesi 15
Lâleli, Istanbul

Turkish Society for Child Welfare
Çocuk Sarayi
11 Anafartaler Caddesi
Ankara

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Diagnosis and assessment, consultation to parents - At the primary school level Child Guidance Centers operated by the Ministry of Education assess those children referred to them through the school system. The Medical Faculties at major university hospitals are becoming increasingly involved in diagnosis and family consultation. The Medical Faculty at Ankara University, Hacettepe University, Gulhane Hospital and the Pedagogical Institute at Istanbul University are examples.

Education, residential care - Education is provided primarily through special classes in regular schools. In 1971, there were about 264 special classes attached to 12 guidance centers in 7 cities, serving about 4,500 students and teaching social adaptation and work skills. Children are eligible for these classes if they have a tested IQ above 50. Educational services for children whose IQ's test below 50 are very limited at present since they are excluded from the public schools. Traditionally these children have been kept in the family or placed in orphanages or mental hospitals, the largest being the Istanbul State Mental Hospital. (In 1970, 215 of the 3,000 residents of this hospital had a diagnosis of mental retardation.)

Since 1970, the Ankara Association for Mentally Handicapped Persons has been operating a school for children considered "educable" between 6 and 16 years of age. In 1976-1977, the Association, out of private contributions, and with some support from the Ministries of Health and Education, bought a building with 5 classrooms and a small workshop. The school operates on a morning and afternoon schedule with children of different age groups coming in shifts. The educational program was prepared with the assistance of the Faculty of Education at Ankara University and is to be developed further with the help of Ankara and Hacettepe Universities and other consultants. The Association also has land outside the city limits of Ankara where it hopes to establish a residential community offering animal husbandry, farming, crafts and other suitable skills.

An association of parents and professional workers was active in Istanbul in the early 1960's, and obtained a grant of land from the government to build a residential home in the Florya area. The project could not be carried out at the time but the idea was revitalized by the Turkish Mothers' Association and, in 1977, a residential home was opened on this land for 100 boys and girls with moderate to severe retardation (IQ between 50 - 30). Financing is from the Association, private contributors and the Ministries of Health and Education.

Research, personnel training - The Pedagogical Institute of Istanbul University has studied 2,300 retarded school children to assess their school achievement and social adaptation. The Psychology Department at Hacettepe University is developing a program in special education. Teachers also receive specialized training at Ankara University and the Teacher's Training Institutes; in the past this has focused on other handicaps but training programs in mental retardation are now developing in response to the growing recognition of the rights of the retarded child.

OTHER INFORMATION FOR VISITORS

This can be obtained from The Turkish Mothers' Association or the Association for the Protection of Mentally Handicapped Persons.

THE UNITED KINGDOM OF GREAT BRITAIN (ENGLAND, SCOTLAND AND WALES) AND NORTHERN IRELAND

Area - 93,026 sq. miles; population of Great Britain - 54.5 mill. (estimate 1975); government - Monarchy with bicameral parliamentary system. Executive powers rest nominally with the Crown but are carried out by the Prime Minister, head of the majority party, and the Cabinet. The major legislative power is in the 630 member House of Commons. Many of Britain's former colonies and possessions are members of the British Commonwealth, an informal association. Britain is a member of the European Economic Community.

Population density is one of the world's highest (574 persons per sq. mile) with 80% urban or suburban; 25% live in the prosperous southeast corner and over 11 million in the London Metropolitan area.

Primary and secondary education from age 5 to 16 is free and compulsory. There are nearly 40 universities. Social welfare is implemented through a national insurance and assistance system covering sickness, maternity, unemployment and industrial accidents, death benefits and pensions for widows, orphans and the aged, and family allowances. Since 1948 the National Health Service has provided free medical and nursing care; there is a small charge for prescribed drugs and dental or opthalmic care.

Provision of local education and social services is largely the responsibility of local authorities. Voluntary organizations have a long history of activity and play an important role in the field of mental retardation.

ENGLAND AND WALES

Welsh affairs are the responsibility of a Cabinet member, Secretary of State for Wales, but administratively England and Wales are considered a unit for most purposes. About 1/4 of the population of Wales is bilingual; 50,000 speak Welsh as a first language.

The earliest statute relating to deviant persons in England dates from 1743 though official care specifically for the mentally retarded was non-existant until the Idiots Act of 1886. During the middle of the 19th century, government and voluntary groups started some residential services which were custodial in nature. Limited community services were provided under the poor law supplemented by the work of voluntary bodies.

In 1895 the National Association for the Care of the Feeble Minded was founded; in 1914 the Central Association for Mental Welfare; and in 1946 they and other groups created the National Association for Mental Health which has provided leadership in the voluntary field (and is now known as MIND).

Also in 1946, a group of parents founded the National Society for Mentally Handicapped Children which has grown rapidly in membership and influence and introduced several innovative programs subsequently adopted by public agencies.

The Mental Deficiency Act of 1913 imposed on local authorities the obligation to make suitable provision for the mentally retarded in their areas. Resources continued to be directed towards insitutional care with the coming of the National Health Service Act of 1946. The institutions became hospitals and were administered as part of the National Health Service while local authorities provided training and occupation for the mentally retarded living at home.

The Mental Health Act of 1959 emphasized the shift away from hospital to community care and made local authorities' powers into a duty. This trend was reaffirmed by the wide general powers in Section 12 of the Health Services and Public Health Act 1968 intended to meet the needs of all mentally retarded persons. In 1971 when the Education (Handicapped Children) Act 1970 came into operation, Local Education Authorities became responsible for the education of all children however severely mentally handicapped.

The term increasingly used in the United Kingdom is "mental handicap" (and "severe mental handicap"), although "mental subnormality" and "mental deficiency" are still in current use.

GOVERNMENT DEPARTMENTS WITH PRIMARY RESPONSIBILITY FOR MENTAL HANDICAP

Department of Health and Social Security
Alexander Fleming House
Elephant and Castle
London SE1 6BY

This Department is responsible for benefits, social services and health services. It holds responsibility for strategic planning of the National Health Service which provides hospital and general medical services for them. The Department also has a responsibility for the social services provided by local authorities, namely training, homes and domiciliary support. In Wales all these services are the responsibility of the Welsh Office. In England these are under the Department's 14 Regional Health Authorities with responsibility for specialist regional planning and certain services. In England and Wales there are 98 Area Health Authorities responsible for area planning and the operational control of health services.

Department of Education and Science
Schools 3 Branch (Special Education)
Elizabeth House
York Road, London SE1 7PH

The Department is responsible centrally for the education of mentally retarded children. Local Education Authorities (counties, metropolitan districts, the Inner London Education Authority and the Outer London Boroughs) are required to ascertain what children in their area require special education and provide it.

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OTHER GOVERNMENT DEPARTMENTS WITH SOME RESPONSIBILITY FOR MENTAL HANDICAP

Department of Employment
Careers Services Branch
97 Tottenham Court Road
London W1B OER

The Department's responsibilities include vocational guidance - the Secretary of State for Employment is responsible to Parliament for the Careers Service. All Local Education Authorities have a duty to provide a vocation guidance service and an employment service. The disablement resettlement service and the government supported employment rehabilitation centers have not played a large role in the field of mental retardation, being used primarily for rehabilitation of the physically handicapped and the mentally ill. However, financial assistance is allocated to some local authorities and voluntary organizations providing the services for the mentally retarded. These functions are now the responsibility of the employment service agency, whose address is: Employment Service Agency (EFG2), 213 Oxford Street, London W1.

Coordination - There is no one central Government department that coordinates services for the mentally retarded for which the individual Government Departments are responsible. In 1975 the Secretary of State for Social Services announced the creation of the National Development Group for the Mentally Handicapped, a group of experts who would help the Secretary of State with policy decisions in the field of retardation. They work in conjunction with the Department of Health and Social Security but pay regard also to aspects of the service provided by other Departments. In close conjunction with the Group works the Development Team, which is invited by local and health authorities to advise on the improvement of services at a local level.

VOLUNTARY ORGANIZATIONS

Primary concern in mental retardation
Professional

Association of Professions for the Mentally Handicapped (APMH)
126 Albert St., London NW 1 7NE (founded in 1974)

National Ass'n of Teachers of the Mentally Handicapped
1 Beachfield Ave., Urmston, Manchester (founded in 1962 in cooperation with NAMH)

Institute of Mental Subnormality
Lea Castle Hospital
Kidderminster, Worcestershire (founded in 1972)

British Society for the Study of Mental Subnormality
Monyhull Hospital
Birmingham 30 (founded in 1952)

Citizen

National Society for Mentally Handicapped Children (NSMHC)
Pembridge Hall
17 Pembridge Square, London W2 4EP

The NSMHC unites about 400 local societies and hospital friends groups. In addition to the central headquarters staff there are 12 regional officers. Its program in promotion of better public understanding and direct service to parents also has included a series of demonstration projects, hospital and emergency care, preschool and day centers, recreation club,social and vocational training, and support for research into causes, prevention and treatment. A trusteeship insurance plan provides for a personal interest in a mentally retarded child or adult's welfare after the parents' death. NSMHC's services also include a network of welfare advisory services through its regional officers and central counselling and speech therapy services. It also runs its own homes, and sponsors training institutes for professional workers, as well as local and regional training programs. NSMHC was a founding member of the International League of Societies for the Mentally Handicapped.

Campaign for the Mentally Handicapped (CMH)
96 Portland Place
London W1N 4EX

Created in 1971 by a small group of young professional and civic workers and operating on a very small budget, this advocacy group quickly achieved a place of influence in the development of national programs because of its effective studies and cogent recommendations. Its many published reports have also had an impact internationally.

Other organizations which include mental retardation

It is not possible to list all the relevant organizations. Some important ones are:

MIND (National Association for Mental Health)
22 Harley St., London W1N 2ED

In addition to pioneering sponsorship of many programs and information services, MIND provided the only training courses, until recent years, for teachers of the moderately and severely retarded. Its legal studies on the rights of the mentally disabled have been outstanding.

The Spastics Society
12 Park Cresent, London W1N 4EX

National Ass'n for the Welfare of Children in Hospital
Exton House, Exton St., London SE1 8UE

British Epilepsy Association
3-6 Alfred Place, London WC1E 7ED

The Toy Libraries Association
Sunley House, Gunthorpe Street, London E1 7RW

The King's Fund Centre
126 Albert Street, London NW1 7NE

Centre on Environment for the Handicapped
126 Albert Street, London MW1 7NE

National Elfrida Rathbone Society
83 Mosley Street, Manchester M2 3OG

League of Hospital Friends
44 Fulham Road, London SW3 6HH

Camphill-Rudolph Steiner-Schools & Village Trust
38 Museum Street, London WC1

Associations of professional workers with some concern in the field of mental retardation are:

National Council for Special Education
17 Pembridge Square, London W2 4EP

Combines such organizations as the National Association for Special Education, the Guild of Teachers of Backward Children, and the College of Special Education

British Ass'n of Social Workers
16 Kent Street, Birmingham

British Psychological Society
Tavistock Houee, Tavistock Square, London WC 1

Royal College of Psychiatrists
17 Belgrave Square, London SW1X 8P6

Royal College of Nursing
Henrietta Place, Cavendish Square, London W1

Confederation of Health Service Employees
Glen House, High Street, Banstead, Surrey

There are a number of voluntary organizations such as Doctor Barnardo's homes which provide registered residential and holiday programs, give support to the official organizations and supplement provision generally.

RESEARCH

Research is carried on or supported financially by the Department of Health and Social Security and the Department of Education and Science, by many universities and other organizations of which the following should be mentioned:

Social Science Research Council
High Holborn, London WC 1

National Foundation for Educational
Research in England and Wales
Near Upton Park, Slough, Bucks.
and 79 Wimpole St., London W1

Medical Research Council
20 Park Crescent, London W1

National Children's Bureau
8 Wakley Street
London EC1V 7QE

Kennedy Galton Center for Mental Handicap
Research and Diagnosis
Harperbury Hospital, Radlet, Herts.

Institute of Mental Subnormality
Lea Castle Hospital
Kidderminster, Worcs.

Hester Adrian Research Center
University of Manchester, Manchester

Thomas Coram Institute
University of London, London W1

Institute for Research into Mental and
Multiple Handicap
16 Fitzroy Square, London W1 5HQ

The last named Institute, founded in 1966 by the National Society of Mentally Handicapped Children but now autonomous, serves as a clearing house, documentation and information centre.

PUBLICATIONS

Journals

Journal of Mental Deficiency Research - sponsored by NSMHC

Apex - published quarterly by the Institute of Subnormality

Special Education/Forward Trends - official journal (quarterly) of the National Council for Special Education

British Journal of Mental Subnormality - published two times a year by the British Society for Mental Subnormality

Educational Research - published by the National Foundation for Educational Research in England and Wales

Journal of Medical Psychology

Journal of Social Medicine

British Hospital and Social Services Journal

MIND Out - quarterly journal of MIND

Parents Voice - quarterly journal of NSMHC

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents - Early identification of mental handicap may be made by consultants, general practitioners, midwives or health visitors; most babies are seen at maternal and child welfare clinics. When such preliminary identification is made, proper diagnosis should be the responsibility of a multidisciplinary assessment team made up of specialists. Parents may request examination by the Local Education Authority at any time after their child's second birthday. Much educational assessment is done in nursery schools; almost all takes place within the first school years.

Education - as pointed out in the introductory section, local education authorities are now responsible for the education of all mentally retarded children, however seriously handicapped they may be.

Special education can be provided from the age of two. Decision on placement, whether special school (day or boarding), or for special class or unit in ordinary school, is made after collaboration with teachers, medical officers, and an educational psychologist, and after consultation with the parent. There are no universally adopted programs; each school has a considerable degree of autonomy as to curriculum, according to the needs of the individual children and the local circumstances. In the early stages there is a good deal of emphasis on play, social, personal and physical development, and on language, music and movement. Later the basic skills of reading, writing and numeracy are introduced. At the secondary stage all schools place emphasis on preparation for life and work after leaving school, with free vocational training, visits to workshops and factories, practical activities for the boys, and training for marriage and raising a family for the girls. The minimum statutory leaving age in special schools is 16.

Work training and employment - As stated above, special schools give emphasis to vocational training. During the final years of education and after leaving school the Careers Service provides special services for the handicapped. Some mentally retarded people go into employment, open or sheltered, when they leave special schools; others go to Adult Training Centers, usually provided by local authorities, which offer not only work training but also social training and further education. Some centers do sub-contract work for local industry.

Medical care - is given under the National Health Service through hospital consultant services, generally by referral from the general practitioner, or by the general practitioner.

Residential care - A large but decreasing proportion of residential care is supplied through traditional large mental retardation hospitals which provide a total of about 52,000 beds. The Wessex Regional Health Authority is currently developing, as an alternative to the traditional all-purpose hospital, a system of community-based homes providing care for the range of needs of mentally retarded people.

As the local authorities developed a network of services for the mentally retarded, the need for informal residential facilities became obvious. The number of these homes is rapidly increasing, providing both temporary and long-term care. Separate facilities exist for children and adults. In Sheffield, help is being given to provide a new coordinated pattern of services (health and local authority) for mentally retarded people, with a full range of residential and training care provided.

Financial assistance - All educational advisory and medical services are provided free. Social security benefits are provided to meet various contingencies that can arise through mental handicap. These benefits include attendance allowance for people in need of a great deal of care and attention; invalidity benefit or non-contributory invalidity pension for people incapable of work; invalid care allowance for people caring for severely disabled relatives at home, and mobility allowance for people unable or virtually unable to work. In addition the supplementary benefit scheme provides financial aid to those people who are not in paid employment and whose "requirements" outstrip their "resources".

Recreation - Programs provided by local authorities have been supplemented by activities sponsored by the NSMHC and its local branches. Most notable are its holiday and short-stay homes, and the Gateway Clubs which furnish leisure time programs to adolescents and adults.

Research - Research in mental retardation has a long tradition in England, both in the biological and behavioral sciences. Major research centers are listed above.

Personnel training - The training of health visitors and social workers is organized on a non-specialist generic basis; their training courses include instruction on the needs of mentally handicapped people. Teachers of the mentally retarded in special schools follow either a degree course followed by post-graduate training; or a 3 to 4 year special course; or an ordinary teaching course followed by experience in ordinary schools and in-service training in special schools. The Council for Education and Training in Social Work has responsibility both for the training of field social workers and Day Service staff. Courses are available both for Teachers of the Adult Mentally Handicapped and on a post-qualification basis for Managers of ATCs. The content and design of these courses is presently under review. Nurses follow a 3-year course leading to qualification as a registered nurse of the mentally subnormal (RNMS), or a 2-year course leading to enrolled status [SEN(MS)].

Planning - Services for the mentally retarded in Great Britain have undergone a continuous process of change; the following documents are of particular importance:

Mental Health Act 1959 (and the Consultative Document "A Review of the Mental Health Act" 1976)

The Scott Report on Training of Staff in Junior and Senior Centers 1962

The Plowden Report on Education 1960

The Seebohm Report on Social Services 1968

The Health Services and Public Health Act 1968

The White Paper "Better Services for the Mentally Handicapped" (Command 463) 1971

The Consultative Document "Priorities for Health and Personal Social Services" 1976

NDG Pamphlet 1 (National Development Group)

More specific planning activity especially notable are the research projects for the Wessex Regional Health Authority, referred to above under residential care, and of the Sheffield Area Health and Local Authority.

OTHER INFORMATION FOR VISITORS

Information for visitors can be obtained from

Department of Education and Science
Elizabeth House
39 York Road
London SE1

Department of Health and Social Security
Alexander Fleming House
Elephant and Castle
London SE1

British Council
10 Spring Gardens
London SW1

MIND
22 Harley Street
London W1

National Society for Mentally Handicapped Children
17 Pembridge Square
London W2

School holidays- School holiday periods vary in different parts of the country. In general, however, the main periods are as follows:

Summer - middle July to early September

Christmas - mid December to early January

Easter - 2 weeks in March or April

Other shorter holidays are given varying to local circumstance and tradition.

SCOTLAND

Area - 30,412 square miles; population - 5.22 million; government - constitutional monarchy with bicameral parliament (House of Commons and House of Lords). Scotland is represented in the British House of Commons by 71 members, but has separate government departments and local government legislation. Its executive in the British cabinet is the Secretary of State for Scotland. There are historically based unique differences in its system of law, judiciary, education, local government and national church. Of Scotland's population about 80,000 are Roman Catholic and the remainder are predominantly Protestant. Official languages are English and Gaelic. At present (1976) there is a great deal of public and political pressure to establish a separate Scottish Parliament. It seems likely that within 5 years there will be such an assembly to deal with domestic matters, which include policies for the mentally handicapped.

The bulk of the population is concentrated in the central industrial belt, and in the rural areas of the south and east. Edinburg, the capital, has a population of half a million people. Glasgow, with almost twice that number, is the center of a large industrial complex based on coal and steel. This west central area of Scotland has suffered a consistent economic decline for more than 50 years, and is one of the most deprived areas of Europe. The discovery of oil off the north and eastern coasts of Scotland may change the whole economic structure of the country; it is certainly affecting the northern part of the country which is largely moorland and sparsely inhabited, with the exception of the city of Aberdeen and the burgh of Inverness. Prominent industries include ship-building, textiles, electronics, food processing as well as the traditional occupations of fishing, agriculture, and the manufacture of whisky.

Social services are provided on a national basis by the regional Health and Social Work Authorities under the Social Work (Scotland) Act 1968. Further social services are carried out by various voluntary bodies, e.g. Salvation Army, Citizen Advice Bureau and the Church. Contributions to the National Health Service are compulsory on all employed persons.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Scottish Education Department
Special Schools Branch
New St. Andrew's House
St. James Centre
Edinburg EH1 3SX

Scottish Education Department
(Division XII)
Social Work Services Group
York Buildings
Queen Street
Edinburgh EH2 1HY

Department of Employment
Scottish Headquarters
Stuart House
30 Semple Street
Edinburgh EG3 8YX

Scottish Home and Health
Department
St. Andrew's House
Edinburgh EH1 3DE

Local education, health and social work authorities provide direct services to mentally handicapped persons in cooperation with the above national governmental organizations.

National planning and coordination - Both the Scottish Education Department and the Scottish Home and Health Department are responsible for national planning and coordination. The Secretary of State has established a Programme Planning Group on Mental Disorder, to advise on planning and policy. The Group has representatives for local and national statutory and voluntary servives, and started work in 1974.

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation

Professional: Association of Professions for the Mentally Handicapped
24 Nutford Place
London W1H 6AN

APMH, established in 1973, draws its membership from more than twenty professions active in voluntary and government services in England, Wales, Scotland, Northern Ireland and Eire.

Citizen: Scottish Society for the Mentally Handicapped
69 West Regent Street
Glasgow G2 2AN

Founded in 1954, the Society now has over sixty branch and district societies,with a membership of over 5,500. In addition to providing certain direct services to the mentally handicapped and their families and general information to the public, contact is maintained with government departments and local authorities. It is a member of the International League of Societies for the Mentally Handicapped.

Including mental retardation

Association for Special Education
Miss M.U. Rennie, Hon. Secretary
Auchentoshan School
Mountblow Road
Dalmuir, Dunbartonshire

Scottish Council on Disability
18/19 Claremont Crescent
Edinburgh

RESEARCH

The research division of the Scottish Education Department and the Scottish Home and Health Department include projects on mental retardation, as do various university departments. In addition, the following body would conduct a research project if approached by any responsible body:

Scottish Council for Research in Education
Dr. Bryan Dockrill, Director
46 Moray Place
Edinburgh EH3 9DH

PUBLICATIONS

Journals - Includes articles by Scottish contributors:

The Journal of Mental Deficiency Research
Pembridge Hall
Pembridge Square (published by the National Society
London W2 4EP for Mentally Handicapped Children)

For other journals, see listing for England and Wales. The Scottish Society for the Mentally Handicapped publishes a quarterly Newsletter.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Early diagnosis and care are the responsibility of the health services, who provide health clinics and paediatric services, nurses and health visitors. Health visitors provide a service to families, in conjunction with clinics, school medical services and family doctors.

Social work departments have an overall responsibility for family care and should provide casework support for families with mentally handicapped members. Child guidance services provided by education departments are, to some extent, the link between medical and educational services, varying according to local patterns.

Children with an identified or probable mental handicap are medically and psychologically examined in consultation with teachers to determine the most suitable form of education. A parent who is not satisfied with the decision of this assessment may appeal to the Secretary of State.

Education - It is the duty of the local education authority to identify children who need special education and to ensure that they receive it. The Education (Mentally Handicapped Children) (Scotland) Act of 1974 provides for the education of all children between 5 and 16 years of age, regardless of degree of mental handicap; thus, an upgrading of junior occupational centers, hospital schools and day centers is taking place. While it is now a general policy to provide education in special schools, in some areas special classes integrated within ordinary schools are preferred.

Local authorities and voluntary organizations provide some pre-school education, playgroups and nursery classes. Greater attention is being given to further education for mentally handicapped students within the evening class programs for adults.

Day Care - Statutory education for the mentally handicapped ceases at age sixteen. After this age, social work departments of local authorities have responsibility for the general welfare of the mentally handicapped and their families. Adult training centers, or senior occupational centers are provided for most mentally handicapped adults. The role of these centers is changing from that of simple occupation towards a more positive social training, but for many mentally handicapped adults they remain the only option since there is little sheltered employment.

Medical care - The National Health Service in Scotland was reorganized in 1974, but the exact nature of services to the mentally handicapped has yet to be defined. General practitioners provide a service to families, while specialist services, such as paediatrics are provided by consultants based in hospitals or clinics. Mental deficiency hospitals provide residential care and the Mental Welfare Commission for Scotland provides an independent supervisory role for residents in these hospitals.

Residential care - The mental deficiency hospitals, mainly established before 1900, set a pattern of residential care which, it is generally agreed, is unsuitable for all but a few, but still restrict the development of other residential services.

Residential schools for moderately and mildly handicapped children are provided by a few local authorities and some voluntary organizations. In some rural areas residential accommodation is provided for pupils attending schools from outlying areas. There are a few schools run on the principles of Rudolf Steiner, e.g. Murtle House in Aberdeen and Garvald School in Peebleshire.

In addition to the village attached to the Camphill School, there are two village communities for the mentally handicapped, and a L'Arche community in Inverness. It is now policy to provide residential accommodation for mentally handicapped adults in community homes or hostels, and, following initiatives by the Scottish Society for the Mentally Handicapped, some 25 such homes are now provided by local authority social work departments. In some areas emphasis is placed on fostering or lodging schemes for adults, but this is approached with caution, as in the past schemes for boarding out mentally handicapped adults in very remote areas proved unsatisfactory. Short stay care is provided by the Scottish Society for the Mentally Handicapped in two homes, and in one home run by the Church of Scotland.

A report published in 1975 suggested that a great many children were placed in hospitals due to the lack of suitable provision in the community; it is certain that many adults are hospitalized because there is nowhere else to go.

Work training and employment - The Department of Employment provides Industrial Rehabilitation Units and a limited amount of sheltered workshops, together with courses in vocational training. These attempt to bridge the gap between leaving school and employment. However, they are really relevant only to the highest grade mentally handicapped people, and the high rate of unemployment in Scotland limits the effectiveness of these schemes. Under the "quota" schemes all employers of any size must employ a percentage of handicapped people, but this is not really beneficial to the mentally handicapped. Some local authorities and voluntary organizations provide sheltered workshops and work centers for the mentally handicapped, but many are restricted to senior occupation centers (see above).

Financial assistance - Education is a statutory responsibility of local authorities and they must meet the cost of education of the mentally handicapped in their own schools or those run by voluntary organizations. Similarly, social work departments meet the cost of senior occupation centers and have wide ranging powers to meet other costs (e.g. short term care).

The Family Fund provides assistance to families with severely handicapped children under 16, usually in the form of cash grants for specific objects (e.g. washing machines for families with incontinent children). Families with severely handicapped members may be entitled to attendance allowance where constant care is necessary. After the age of 16, handicapped people may receive Non-Contributory Invalidity Pension, and there is a range of benefits including Mobility Allowance and Supplementary Benefit that may be claimed. There are, however, loopholes still in the system.

Voluntary organizations are self-supporting but may receive grants from Central Government local authorities.

The National Health Service (which includes all mental deficiency hospitals) and social security payments are funded by national government; social and educational services are funded basically by local taxation -- this may be said to hinder the development of community care.

Recreation - Voluntary organizations have an extensive program and provide holidays of various types. Some schools and centers also provide recreational programs.

Research - There are a number of research projects. In North East Scotland extensive epidemiological surveys have been carried out by Ross, Innes and others. Research into the ascertainment of mentally handicapped children is being carried out by Dr. Margaret Clark at Strathclyde University; at Stirling University play is being studied; and in Glasgow an extensive survey into the effect of provision of services on families with pre-school handicapped children. Further research into pre-school is being conducted under the auspices of the Warnock Committee on education of the handicapped. Other research in Glasgow revealed a high incidence of handicap caused by lead piping of the water supply, and there are a number of projects on varying scales. The work being carried out in Edinburgh into spina bifida is of partial relevance (there is a very high incidence of spina bifida in Scotland).

Personnel training - The Central Council for Education and Training in Social Work is assuming responsbility for training for all staff other than medical or educational staff. Courses in residential and day care work have been organized at further education colleges, including courses for instructors in adult centers. Teachers must be approved as primary teachers before completing a one-year course in special education at a college of education, and there is a course for assistants. Training for nursing staff is based on general nursing training, approved by the Scottish Home and Health Department, and is based in hospitals.

Other information for visitors - Information for professional visitors from abroad can be supplied upon request by:

The Scottish Education Department
Special Schools Branch
New St. Andrews House
St. James Center
Edinburgh EH1 3SX

and by:

The Scottish Society for the Mentally Handicapped
69 West Regent Street
Glasgow G2 2AN

The usual school holiday period is the months of July and August. Schools are also closed for a fortnight during Christmas, New Year and Easter.

NORTHERN IRELAND

Northern Ireland is located in the northeast of Ireland and consists of 6 of the 9 counties of the ancient Irish province of Ulster. It has an area of 5,452 square miles and a population of about 1.5 million. It is part of the United Kingdom and elects 12 members to the House of Commons at Westminster.

Northern Ireland's major industries are agriculture, engineering (including shipbuilding and aircraft manufacture), textiles, construction, food, drink, tobacco and clothing.

Education for children between the ages of 5 and 16 years is compulsory and free. The social security scheme in Northern Ireland is virtually the same as that in the rest of the United Kingdom.

The introduction of the Mental Health Acts (Northern Ireland), 1948 and 1961, laid the base for health and personal social services for those mentally handicapped persons ascertained to need special care, i.e. persons who are socially inefficient to such a degree that they require supervision, training or control in their own interests or in the interests of other persons. Under the Health and Personal Social Services (Northern Ireland) Order 1972 persons requiring special care are the responsibility of four Health and Social Services Boards under the control of the Department of Health and Social Services.

Educationally subnormal children, capable of being taught in special schools or classes but not in need of special care are provided with education by five Education and Library Boards (the Education and Libraries Order 1972) under the control of the Department of Education. They may be referred to the Health and Social Services Boards at the age of 16 if they are found to need further supervision and training because of social inadequacy.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Department of Education
Rathgael House
Balloo Road, Bangor
County Down

The Education and Library Boards are required to provide efficient education throughout the three stages of the statutory system of public education - primary, secondary and further education.

Department of Health and Social Services
Dundonald House
Upper Newtownards Road
Belfast BT4 3SF

The four Health and Social Services Boards are responsible for the provision of health and personal social services in their respective areas:

Eastern Health and Social Services Board
65 University Street
Belfast BT7 1HN

Western Health and Social Services Board
15 Gransha Park
Glooney Road
Londonderry BT47 1TG

Northern Health and Social Services Board
County Hall
182 Galgorm Road
Ballymena
Co.Antrim BT42 1HN

Southern Health and Social Services Board
20 Seagoe Industrial Estate
Craigavon
Co.Armagh BT63 5QD

VOLUNTARY ORGANIZATIONS

Most local associations for the mentally handicapped are members of the

National Society for Mentally Handicapped Children
Northern Ireland Region
4 Annadale Avenue
Belfast BT7 3JH

RESEARCH

The Clinical Institute
Royal Victoria Hospital
Belfast

The Queen's University
Belfast

Muckamore Abbey Hospital
Muckamore
County Antrim

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Action to have a person ascertained as requiring special care can be initiated by a number of people including the parents, general or consultant medical practitioners, and the professional staff of the Education and Library Boards and the Health and Social Services Boards. As soon as any handicap is suspected, a comprehensive assessment of the nature of the handicap and of the needs and problems of the handicapped person and his family is conducted by a multidisciplinary team of professionals, including where appropriate a pediatrician, a psychiatrist, a psychologist, social work and nursing staff and the family doctor. This multidisciplinary assessment is repeated at intervals as the mentally retarded child or adult grows and develops.

Education - Special schools, as well as special classes in ordinary primary and secondary schools are provided for educationally subnormal children up to age 16 years by the Education and Library Boards. The Health and Social Services Boards provide special care schools for the more severely mentally retarded who are taught basic social skills and simple work activities.

Work training and employment - Day centers provide social training, further education, occupational and recreational activity for mentally handicapped persons over the age of 16 years. Those with suitable ability may progress from day centers to workshops for training in work habits, routine and basic skills. After a period of such training, the more able may be placed in sheltered employment or appropriate open employment.

Residential care - Health and Social Services Baords provide special care hospitals and residential homes for mentally retarded children and adults who, for various reasons, cannot live in the family home. The emphasis in the past on development of hospital facilities is reflected in the present shortage of other residential accommodation.

Recreation - Voluntary organizations and groups, including the very active Northern Ireland parents' associations, make a substantial contribution to the well-being of mentally retarded people in the community and in residential accommodation by providing and assisting with recreational activities and holidays.

Research - Most of the medical and psychological research projects undertaken in causation and treatment areas have been in conjunction with research workers attached to the Queen's University, Belfast. Investigations are concerned with chromosomal abnormalities, metabolic disorders, psychological and sociological problems.

Education and training of personnel -Muckamore Abbey Hospital, in association with the Central School of Psychiatric and Special Care Nursing, offers courses leading to enrollment or registration by the Northern Ireland Council for Nurses and Midwives. The training of special care teachers has been integrated with general arrangements for teacher training, and since 1976 a course leading to a Bachelor of Education degree has incorporated training for special care teachers at Ulster College, Jordanstown, Newtownabbey, Co. Antrim.

Planning - The Department of Health and Social Services is currently reassessing policy on services for the mentally retarded in Northern Ireland, issuing in 1976 a "Consultative Document on Services for the Mentally Handicapped." It proposes to issue a definitive policy statement when responses to the Consultative Document are fully considered.

OTHER INFORMATION FOR VISITORS

Inquiries may be directed to the

Department of Health and Social Services
Special Care Branch
Dundonald House
Upper Newtownards Road
Belfast BT4 3SF

School holiday periods follow the general pattern of schools in the British Isles: 2 months in the summer (July until early September) and about 2 weeks at Christmas and Easter.

U. S. S. R.*

The Union of Soviet Socialist Republics, in area the largest country in the world (8,649,489 square miles) has a population of 256.7 million (1976). It is a federation of 15 Union Republics within certain of which are further subdivisions such as Autonomous Republics, Autonomous Regions and National Districts. The largest Union Republic, the Russian Soviet Federal Socialist Republic (RSFSR), has about 55 percent of the population of the Soviet Union and 76 percent of its territory. Moscow, the capital city, has a metropolitan population of over 7.6 million.

The USSR was formed in 1922, the first Soviet constitution having been adopted in 1918 by the RSFSR. The highest legislative authority is the bicameral Supreme Soviet which appoints the Council of Ministers (Premier and Deputies), the executive and administrative organ of government.

The economic foundation of the USSR is the socialist ownership of the instruments and means of production (state or cooperative and collective). Industrialization has proceeded very rapidly in this vast country which is rich in natural resources.

Since 1930 education has been free and compulsory. The 8-year primary school is followed by 3-year secondary school courses in preparation for entrance to a technical institute or university. Illiteracy has been reduced to 1.5 percent.

Social benefits for all workers include free health services, paid vacations, sickness insurance, pensions (including 3 types of disability pensions), and special benefits to mothers and children. Health services are extensively organized and very well staffed, with great emphasis put on preventive measures, particularly in services for children through a continuing program of screening, early diagnosis and treatment.

Leading Soviet authorities such as Professor M.S. Pevzner use the term oligophrenia to include only those forms of mental deficiency which arise as a result of intrauterine or early lesions of the central nervous system. This is differentiated from backwardness in mental development due to psychosocial or other causes. The organization of assistance to persons with oligophrenia and other forms of mental retardation (estimated at under one percent of the population) is based on the principles of compensating the deficiency to the utmost possible extent, promoting social rehabilitation, and preventing invalidity. It is organized under the direction of the following ministries:

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Health of the USSR
Director Z. N. Serebriakova
Chief specialist in psychoneurology
Rakhmanovskii per 3, Moskow

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*See last page of report.

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Ministry of Social Security of the RSFSR
Management of homes for the aged and disabled
Director of the Department
I.F. Saddatenkov
162, ul. Shabolovka, dom 4, Moskow

Ministry of Education of the USSR
Main management of schools
Director of the Department
V.P. Davydov
Zubovskaia pl., dom 4, Moskow

State Committee of the Council of Ministers of the USSR for Occupation and Technical Education
Sadova-Cukharevskaia ulitsa, dom 16
Moskow-16

All local agencies involved in rendering assistance to the mentally retarded are within the organizational structure of the ministries listed above.

Coordination: The coordination of the activities of the different ministries concerned with rendering assistance to the mentally retarded is effected by interdepartmental conferences and consultations.

Volunteer organizations: Volunteer societies and organizations concerned with assistance for the mentally retarded do not exist in the USSR. However, the participation of parents of mentally retarded children in the specialised programs is actively encouraged. Parents' Councils of the various children's facilities (schools and Children's Houses) meet regularly to find ways of assisting the teachers; parents are also represented on the Pedagogical Council of teachers of each program.

RESEARCH

The central scientific institution which coordinates and directs all scientific research in the field of medicine in the USSR is the USSR Academy of Medical Sciences. It includes the commission on problems of mental illness, which deals specifically with coordination and direction of the scientific research of mental retardation from the medical and medico-biological aspects. Professor S. S. Mnukhin is in charge of the problem of "oligophrenia"; he is the director of the department of psychiatry of the Leningrad Medical Pediatric Institute (Leningrad, ulitsa Listovskaia, dom 2).

All-Union Scientific Society of Neuropathologists and Psychiatrists also participates in the coordination of the scientific research concerning oligophrenia (president of the society, director of the department of psychiatry of the First Moscow Medical Institute, Professor V. M. Banshchikov, ulitsa Rossolimo, dom II, Psikhiatricheskaia klinika imenii S. S. Korsakova, Moskow). The coordination of scientific studies concerning the medical aspects of the problem of oligophrenia is also in the province of the section for pediatric psychiatry of the All-Union Scientific Society of Neuropathologists and Psychiatrists (chairman of the section - Professor V. V. Kovalëv, director of the department of pediatric psychiatry of the Central Institute for the Advanced Training of Physicians (Moskva, 242, ploshchad'

Vosstania, dom 1/2). The activity of the Scientific Society of Neuropathologists and Psychiatrists concerning the coordination of research in the field of medico-biological aspects of the problem of oligophrenia is carried out in a close cooperation with the Commission on Problems of the USSR Academy of Medical Sciences.

The scientific research of the pedagogical aspects of the problems of mental retardation is carried out in the Scientific Research Institute of Defectology of the Academy of Pedagogical Sciences (Ulitsa Pogodinskaia dom 8, Moskva-Director T. A. Vlasova) and also in the departments of psychopathology and logopedics of "defectology" schools of pedagogic institutes. The questions of the social rehabilitation and occupational training of the mentally retarded are handled in the Central Research Institute of Employability and Work Organization of the Disabled (Moskva, 57, ulitsa Ostriakova, dom 3).

PUBLICATIONS

Research studies on the problems of mental retardation are published in the"Zhurnal Nevropatologii i psikhiatrii imeni S.S. Korsakova"(Journal of Neuropathology and Psychiatry of S.S. Korsakov), the journal "Defectologiia" (published since January 1968) and in the collected publications of scientific research studies of the institutes listed above, in the works of the All-Union, All-Russian and Republic Scientific Societies of Neuropathologists and Psychiatrists, psychiatric-neurological hospitals, departments of psychiatry and psychopathology of the medical and pedagogical institutes. Frequently reports on conferences and work in other countries are included as e.g. in "The Special School", journal of the Scientific Research Institute of Defectology.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents: Mental retardation in a number of forms (Down's syndrome, microcephaly, phenylketonuria, etc.) is already detected by pediatricians in the maternity hospitals and later both by teachers and instructors in the day nurseries, kindergartens, schools and by pediatricians and pediatric psychoneurologists. After the patient with suspected mental retardation is identified, he is seen by a pediatric psychoneurologist who decides whether oligophrenia is present, its etiology and clinical form. The consultation examination of mentally retarded children is done by pediatric psychoneurologists in pediatric polyclinics and psychoneurological dispensaries. Medical-genetic consultations detect forms of oligophrenia due to genetic factors, measures are taken for prevention of oligophrenia in the progeny and appropriate advice is given to the couples.

Education and vocational training: Pre-school education and preparation for training in a special school is provided by specialized day nurseries/kindergartens. The school education of mentally retarded is insured by a wide net of special (auxiliary) schools. More than 90 percent of all special schools for handicapped children are boarding schools. The duration of education in these schools is 8 years; staffing ratios are generally high, with a special teacher and 2 assistants ("up-bringers") for each class. In the course of education the children learn simple occupations and are then prepared for work. In addition, some occupational and technical schools have special groups for occupational training of the mentally retarded. Work training of mentally retarded adolescents with more pronounced intellectual disorders and mental deficiencies is carried out in occupational therapy workshops of the dispensaries. It should be pointed out that education is provided by specially trained teachers not only for the boarding and day schools for debiles (mildly retarded) under the Ministry of Education, but also for the special babies' homes and creche-kindergartens under the Ministry of Health and the residential Children's Houses for imbeciles and idiots (moderately and severely retarded) under the Ministry of Social Security.

Employment: Mentally retarded persons with a deficiency of a mild degree (oligophrenia in the degree of debility) who completed special school and occupational technical schools are prepared in general for work in basic industries and agriculture. The more severely handicapped are employed in productive work in sheltered programs (including industrial and farm work).

Medical care: Medical assistance for the mentally retarded, depending on the disorder (general somatic, neuropsychiatric and the like), is rendered both in the treatment centers of the general medical service (in polyclinics, hospitals, etc.), by various specialists (therapeutists, pediatricians, surgeons, etc.) and in psychoneurological dispensaries, hospitals and occupational therapy workshops.

Residential care: Hospital care for oligophrenic patients is provided in psychiatric hospitals of the public health service and in the homes for the disabled maintained by the Social Security agency (Children's Houses and Homes for Invalids). In the psychiatric hospitals these patients receive various kinds of treatments, principally drug therapy, physiotherapy and physical therapy. In the homes for the disabled the main role belongs to the complex of measures concerning education, special training and social and work adjustment of the mentally retarded.

Financial assistance: Medical and educational services are free. Parents make a contribution towards residential costs for children under 18, based on monthly income, with free care for children of unmarried mothers, widows, invalids, etc.

Recreation: Recreation for the mentally retarded is provided at the place of their established residence, and includes various cultural and sport measures, work in recreational groups and the like.

Research: The principal trends of the investigation of the problem of mental retardation include the study of the medico-biological nature (etiology and pathogenesis) of oligophrenia, diagnosis and clinical study of various forms of oligophrenia, elaboration of preventive and therapeutic methods, questions of social rehabilitation of the mentally retarded, including general and occupational training, education and study of the psychology of the mentally retarded. There is a very close link between research and practice.

Personnel training: Training of personnel for work with the mentally retarded is carried out in the medical schools that train auxiliary medical personnel for psychiatric institutions. Psychiatrists and psychoneurologists who work in the institutions for the mentally retarded are trained in large psychiatric hospitals and in special courses in the department of pediatric psychiatry of the Central Institute for the Advanced Training of Physicians. Training of defectologists, teachers who work with handicapped children, is specialized with regard to the type of handicap, those who teach the mentally retarded being also qualified in speech therapy (logopedics). Preparation may be in a 5-year subsidized course at a Pedagogical Institute or Faculty of Defectology, or part time for already qualified teachers. Theory is closely linked with practical work in the schools.

Salaries for special teachers are higher than in ordinary schools. There is still a shortage of qualified defectologists. Trained child care workers ("up-bringers" or "éducateurs") are responsible for extracurricular programming and are also employed as classroom auxiliaries. Most are trained at the level of a primary school teacher.

OTHER INFORMATION FOR VISITORS

The foreign relations offices of the Ministry of Health and the Ministry of Education are the main authorities which regulate communication between Soviet and foreign specialists in the field of mental retardation. Requests for information or for arrangements for an official visit shojld be addressed to these agencies either directly by mail or through the Soviet Embassy in the country concerned. All travel arrangements are made through INTOURIST.

School holidays in the USSR are approximately November 4 - 9; December 30 - January 10; March 25 - April 1; June 20 - August 31.

* Note: Official up-dating of this report has not been received in time for inclusion. However, a few additions have been made on the basis of information received since publication of the 1971 edition of the Directory. The following references will be of interest:

Soviet Education Vol.XIV, N°1-2-3, November, December, January 1971-72: Special Education in the Soviet Union. Translated papers from Soviet periodicals, White Plains, N.Y. (USA) International Arts & Sciences Press. 210 pages.

The Present situation and Trends of Research in the Field of Special Education Chapter on USSR by T.A. Vlasova and V.I. Lubovsky, Paris, UNESCO, 1973. Introduction and pages 105 - 146.

Windows on Russia, A Report of the United States -- USSR Seminar on Instruction of Handicapped Children J. J. Gallagher, editor, Washington, D.C. U.S. Office of Education, DHEW Publication 74-05001. 1974 118 pages.

Blick über die Grenzen - Behindertenarbeit in Russland. Report on a 1976 visit to Moscow and Leningrad by a professional team of the W. German National Association Lebenshilfe für geistig Behinderte, in Lebenshilfe, vol.16, 2:1977 pages 96 - 100.

UNITED STATES OF AMERICA

Area - 3,615,122 square miles; population - 215 million. An annual summary of social, political and economic information is published in the Statistical Abstract of the United States, available from the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402.

The United States of America are composed of 50 sovereign states, each with its own legislature and state administration, presided over by an elected governor. While certain governmental activities are reserved to the federal government, human services such as those in the field of mental retardation are essentially organized by each state, and the result is a wide variation in the name and function of the relevant state agencies. However, beginning with President Franklin Delano Roosevelt in the 1930s, the federal government has developed a growing network of services and subsidies to support the states in the area of health, education and welfare.

Residential institutions serving blind, deaf, and mentally retarded children were first organized in the mid-nineteenth century. Special day school classes for handicapped (including retarded) children began to appear around 1900, but their growth was very slow and 50 years later large numbers of retarded children were still excluded from any schooling.

Effective planning had its roots in the post-World War II emphasis on rehabilitation and the dignity and worth of the individual human being, and was spearheaded by the National Association for Retarded Children, founded in 1950. In 1961 President John F. Kennedy appointed a Panel on Mental Retardation which submitted to him in October 1962 A Proposed Program for National Action to Combat Mental Retardation. This initiative by the federal government is carried forward by the President's Committee on Mental Retardation (see below).

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

The President's Committee on Mental Retardation (PCMR)
Fred J. Krause, Executive Director
Washington, D.C. 20201
Regional Office Building
7th and D Streets, S.W.

Executive Departments

- U.S. Department of Agriculture
- U.S. Department of Commerce
- U.S. Department of Defense
- U.S. Department of Health, Education and Welfare
- U.S. Department of Housing and Urban Development
- U.S. Department of Interior
- U.S. Department of Justice
- U.S. Department of Labor
- U.S. Department of State
- U.S. Department of Transportation
- U.S. Department of Treasury

Executive Agencies

ACTION (combining Peace Corps and other volunteer programs)
Civil Service Commission
General Services Administration
National Science Foundation
President's Committee on Employment of the Handicapped
President's Council on Physical Fitness and Sports
Small Business Administration

Department of Health, Education and Welfare

The Department of Health, Education and Welfare (DHEW) has major responsibility for mental retardation programs. Component agencies within DHEW with such responsibility are:

Office of Human Development Services (OHDS)
    Administration for Children, Youth and Families
    Rehabilitation Services Administration

Office of Education
    Bureau for Education of the Handicapped

Public Health Service
    Health Services Administration
    National Institutes of Health

Health Care Financing Administration

Social Security Administration

Office for Civil Rights

The Office for Handicapped Individuals in the Office of Human Development Services provides coordination and information focus to the Department's efforts on behalf of all types of physical and mental handicaps.

National planning and coordination - The President's Committee on Mental Retardation is the official planning and coordinating body in the field of mental retardation. Established by Executive Order of President Johnson in 1966, it consists of 21 citizen members and five ex-officio members, all appointed by the President, to advise him on what is being done for mentally retarded persons; to recommend Federal action where needed; to promote coordination and cooperation among public and private agencies; to stimulate individual and group action; and to promote public understanding of persons with mental retardation. In addition to an Annual Report to the President which critically analyzes the developments in the field and set down tangible goals, the Committee has published many significant studies (a publication list is available), e.g. Changing Patterns in Residential Services for the Mentally Retarded, 1969, revised 1976; Mental Retardation: Century of Decision 1976; Mental Retardation . . the known and the unknown, 1976.

VOLUNTARY ORGANIZATIONS

with primary concern in mental retardation
Citizen

National Association for Retarded Citizens (NARC)

Philip Roos, Ph.D., Executive Director
2709 Avenue E East, P.O. Box 6109
Arlington, Texas 76011

NARC Governmental Affairs Office
1522 K Street,N.W., Suite 516
Washington, D.C. 20005

NARC was founded in 1950 as the National Association of Parents and Friends of Mentally Retarded Children, to bring about better services and changed attitudes for all retarded persons. In 1974 the name was changed to Retarded Citizens. NARC has over 1,800 local and state units, with a total membership of 224,000. The Youth NARC organization provides direct service opportunities for young people between the ages of 13 and 25, primarily with retarded persons, but also in public education and other areas. Slowly but increasingly, retarded persons themselves are becoming members of ARC units, but are also receiving encouragement to form their own organization.

From the beginning NARC included interested professional workers and supported bio-medical and behavioral research, prevention, improvement of daily living skills and environmental conditions. NARC's Research and Demonstration Institute promotes programming and specific area studies. As a consumer organization, monitoring and advocacy are important responsibilities for all levels of the organization; NARC has developed program guidelines in most relevant areas.

Member of the International League of Societies for the Mentally Handicapped since 1962, NARC has hosted two League Symposia, on Volunteers (1971) and on Normalization and Integration - the Quality of Life (1976).

Professional

American Association on Mental Deficiency (AAMD)
A.J. Berkowitz, Ed.D.,Executive Director
5101 Wisconsin Avenue, N.W.
Washington, D.C. 20016

In 1976 AAMD celebrated its 100th anniversary, hosting the Fourth Congress of the International Association for the Scientific Study of Mental Deficiency of which it was a founding member. AAMD represents both USA and Canadian professional workers from a wide variety of disciplines; it has 16 Divisions, - education, general, medicine, recreation, residential living, vocational rehabilitation, occupational & physical therapy, administration, psychology, nursing, religion, social work, nutrition and dietetics, private residential facilities, speech pathology & audiology, legal process. Annual national conventions are held and also regional meetings. In addition to the AAMD journals noted below, especially significant publications have been its Adaptive Behavior Scale and the Manual on Terminology and Classification, most recently revised in 1977.

American Association of University Affiliated Programs
for the Developmentally Disabled
Seldon Todd, Executive Director
2033 M Street, N.W., Suite 406
Washington, D.C. 20036

This Association was founded in 1971 to provide a central office for the 35

University Affiliated Facilities which are responsible for interdisciplinary training for professional and other workers. The UAF programs were a direct result of the 1963 legislation resulting from recommendations of President Kennedy's Panel on Mental Retardation. Since 1970 their mandate includes also the other developmental disabilities, i.e. cerebral palsy, epilepsy, autism and other handicapping conditions closely related to mental retardation.

National Association of Mental Retardation Program Directors
Robert M. Gettings, Executive Director
2001 Jefferson Davis Highway, Suite 1010
Arlington, Virginia 22202

With membership consisting of one person per state, appointed by the Governor, this organization which was established in 1963 facilitates the exchange of information between the states, and represents the interests of state mental retardation program officials in the development and implementation of programs of the federal government. Non-members may subscribe to the two monthly newsletters which provide concise up-to-date information on state and local developments and on the Washington legislative scene.

National Association of Private Residential Facilities
for the Mentally Retarded
Ms. Joni Fritz, Executive Director
6269 Leesburg Pike, Suite B-5
Falls Church, Virginia 22044

Organized in 1970, the Association brings together administrators of private facilities, with large and small programs, including boarding schools, group homes, foster homes, and other kinds of community living. An information and referral service is available; annual conferences and comprehensive insurance protection are provided to members.

Private Foundation

The Joseph P. Kennedy, Jr. Foundation
Robert M. Montague, Executive Director
1701 K Street, N.W., Suite 205
Washington, D.C. 20006

The Foundation was established by the Kennedy family in 1946 to support facilities for the study of mental retardation and its clinical treatment; more than a dozen university programs have been assisted. Most recently, scholars in bio- and medical ethics have been supported, and the Foundation has produced a series of challenging films in this area. Known throughout the world are the Special Olympics' year-round sports program, created and sponsored by the Kennedy Foundation; a new physical activity and family play program is called "Families Play to Grow." The Kennedy International Awards Program honors men and women who have given outstanding contributions to the field of mental retardation in scientific research, leadership and service.

Other national voluntary organizations which include mental retardation

Citizen

United Cerebral Palsy Associations Earl Cunerd, Executive Director 66 East 34th Street New York, N.Y. 10016	UCPA was founded in 1949 and now coordinates the work of 300 state and local affiliates.
Epilepsy Foundation of America Jack McAllister, Executive Director 1828 L Street, N.W., Suite 406 Washington, D.C. 20036	EFA was established in 1967 by merger of several pre-existing organizations; it has nearly 200 state and local chapters.
National Society for Autistic Children Robert J.Griggs,Executive Dir. 1234 Massachusetts Avenue, N.W. Washington, D.C.	NSAC, founded in 1965, promotes legislation, education and research to benefit all children with severe behavioral disorders.

Professional

American Association for the Education of the Severely/Profoundly Handicapped 1600 West Armory Way Seattle, Washingtin 98119	AAESPH -Prof. Norris G.Haring, Pres. Founded 1974; membership open to all interested persons. Annual conference, quarterly Review and monthly Newsletter.
American Alliance for Health, Physical Education and Recreation 1201 16th Street, N.W. Washington, D.C. 20036	AAHPER - Since 1972 has sponsored an Information and Research Utilization Center on Physical Education and Recreation for the Handicapped.
The Council for Exceptional Children William C. Geer, Executive Director 1920 Association Drive Reston, Virginia 22091	CEC was founded in 1922 to advance the education of exceptional children and youth, both handicapped and gifted. Provides extensive information services and publications.
National Rehabilitation Association Richard Oestreich, Executive Director 1522 K Street, N.W. Washington, D.C. 20005	NRA's largest professional Division is its Rehabilitation Counselling Association, established in 1958.
National Association of State Mental Health Program Directors Harry Schnibbe, Executive Director 1001 Third Street, S.W.,Suite 116 Washington, D.C. 20024	Many Mental Health Departments have administrative responsibility for mental retardation services.

For reasons of space this listing does not include many which have a concern for mental retardation in combination with other handicapping conditions, for example, professional associations of social workers, physical and occupational therapists, associations for art and music therapy, the National Therapeutic Recreation Society, North American Riding for the Handicapped Association, Boy Scouts, Girl Scouts, Camp Fire Girls, "Y" programs, all of which have included retarded young people. There are also such organizations as the National Tay-Sachs and Allied Diseases Association, National Tuberous Sclerosis Association, Spina Bifida Association of America, and Down's Syndrome Congress (affiliated with NARC). Finally, there is now a growing number of groups organized by mentally retarded people themselves, such as People First which started in Oregon and has chapters in some other states, Project II in Nebraska, and the Mohawks and Squaws in Massachusetts.

Further information can be requested from the Clearing House on the Handicapped Office for Handicapped Individuals, DHEW, Washington, D. C. 20201

RESEARCH

(See item under Brief Descriptive Notes)

For information write to:

Mental Retardation Branch
National Institute of Child Health
and Human Development
National Institutes of Health
Bethesda, Maryland 20014

Research and Demonstration Institute
National Association for Retarded
Citizens
2709 Avenue E East
Arlington, Texas 76011

PUBLICATIONS

Journals

American Journal on Mental Deficiency, bi-monthly, Mental Retardation, quarterly	American Association for Mental Deficiency
Mental Retardation News, monthly newspaper	National Association for Retarded Citizens
Exceptional Children, bi-monthly Teaching Exceptional Children, quarterly Education and Training of the Mentally Retarded, quarterly	The Council for Exceptional Children
The Exceptional Parent, bi-monthly practical guidance for parents of children with disabilities	Psy-Ed Corporation, Room 708, Statler Office Building 20 Providence Street Boston, Mass. 02116
AAESPH Review, quarterly	American Association for the Education of the Severely/Profoundly Handicapped
ARISE. 10 times a year a new voice for the nation's handicapped people	American Research Institute in Special Education, 55 West Park Avenue New Haven, Connecticut 06511
Rehabilitation Literature, 10 times a year; abstracts of relevant books and articles.	National Easter Seal Society for Crippled Children and Adults 2023 West Ogden Avenue Chicago, Illinois 60612

In addition, most associations and agencies listed in this report publish newsletters which carry significant, albeit specialized, information.

Directories - Information services are increasingly becoming available in computerized form, provided by a variety of voluntary and governmental agencies and organizations.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Beginning in 1958, federal grants to states under the Crippled Children's and Maternal and Child Health Programs have supported mental retardation clinics (child development clinics), now numbering over 150. Services include diagnosis, evaluation of a child's capacity for growth, development of a treatment and management plan, interpretation of findings, counselling of parents, and follow-up care. Legislation introduced for President Kennedy in 1963 authorized funds for construction of community facilities providing an array of diagnostic, consultation and referral services. Much case finding, diagnosis, assessment and parent consultation, however, is conducted by private physicians on an individual family basis. Local health services in some communities may provide services. Parent-to-parent counselling is a function of the parent movement, but is available only in some areas. The Head Start and Home Start programs for pre-school children include 10% handicapped children; there is increasing recognition of the importance of early intervention and support to families.

Education - New legislation which took effect in October 1977 (Public Law 94-142) provides federal supplemental funds to states on the condition that the state assure that all handicapped children have available a free, appropriate, public education. Such appropriate (special) education must be available for children aged 3 to 17 years by October 1,1978, and for ages 3 through 21 years by October 1, 1980. Furthermore, the federal law prescribes that first priority for service must go to those children who previously were unserved. Second priority goes to children previously served in an unsatisfactory way. This clearly implies that special attention must be given to children with severe mental or physical disabilities.

Public education throughout the United States is administered through local, politically independent school districts (there are 16,000 of them), subject to certain control (and fiscal support) from the state education departments in the various states. Therefore the extent to which this new federal law is implemented will vary greatly not only from state to state but also within states.

There is increasing emphasis on "mainstreaming," i.e. on keeping children with special needs within or as close to the regular school programs as is feasible. There is a distinct move away from special schools; special classes are mostly located in the regular public schools, and many children who in previous years attended special classes are now in regular classes, but spend certain hours for very specific remedial instruction in so-called resource rooms.

In recent years special education programs have been enriched by vocational training, including work-study programs where part of the day is spent in an actual work site.

Work training and employment - Work training and employment placement for mentally retarded persons is authorized under the federal Vocational Rehabilitation Act which provides federal funding and imposes federal standards; it was recently amended to give preference to persons with more severe handicaps. Unfortunately, because of limited funding, there are extensive waiting periods for admission to training programs, most of which are carried out by private agencies under contract with the state Rehabilitation Department.

Partly because of the considerable rate of unemployment, and partly because employers, labor unions and insurance companiez dislike making allowance for persons with handicapping conditions, employment opportunities remain limited. as a result, individuals who could hold a regular job remain in sheltered workshops for long periods. However, for the past 15 years the federal government has tried to set a good example by hiring thousands of persons with mental retardation.

Medical care - A nationally financed system of comprehensive health care does not yet exist although legislative proposals are before Congress. There is wide use of group or individual private insurance systems. Medicare and Medicaid, two new federally financed programs, pay for the purchase of health services to the aged, indigent,and many of the handicapped. Residential institutions for retarded persons have their own medical staff or obtain service through contractural arrangements with a nearby hospital. Retarded children and adults living in the community obtain medical care through their family physician and/or through the (principally diagnostic) medical component of the network of community mental retardation centers. The professional organizations of dentists and of pediatricians have special committees on the handicapped.

Since 1935 the federal government has provided a limited program for handicapped children known as the Crippled Children's Services; recently there has been established under medicaid a program known as EPSDT (rarly and periodic screening, diagnosis and treatment).

Residential care - All states except Nevada have at least one public mental retardation institution. Many states have several. In 1976 there were 237 such institutions, serving about 155,000 persons. Significantly, beginning around 1965 there has been an increase in the number of public institutions, but a very distinct decrease in the number of residents in them, i.e. the size of the institution is rapidly declining. However, many states remain burdened by large facilities with massive, outdated buildings, insufficient budgets and personnel. Private residential institutions, most of them relatively small, serve about 30,000 persons, and some 15,000 retarded persons are atill in hospitals for the mentally ill, but these figures, too, are decreasing.

A nationally adopted policy of "de-institutionalization" has resulted in a rapid increase of residential arrangements of great diversity, group homes, apartments, single and "clustered," individual boarding and/or foster homes, enabling persons with mental retardation to live in the community.

Financial assistance - Mentally retarded persons comprise a substantial portion of the more than two million disabled persons who receive federal assistance through the Supplementary Security Insurance Program (SSI). A base payment of $189.40 per month (1978) is paid to an eligible retarded person if he has no other earned income and meets disability criteria (generally an I.Q. of 69 or lower). Some states supplement the federal payment with additional funds. Once eligible for SSI, the retarded person also becomes eligible for Medicaid which finances his medical costs. Certain retarded adults are eligible for benefits as an "adult disabled child" from the federal Old Age and Survivors Disability Insurance Program, as a dependent of an insured worker who has retired, died or become disabled. Mental retardation is the primary diagnosis in 53% of the childhood disability allowances. Individuals residing in institutions are not eligible for SSI payments unless the institution has met the specific standards required for Medicaid support; in that case, the resident may receive a $25 a month benefit for personal expenses.

Recreation - In general, recreation programs have traditionally been a significant part of the services provided by non-governmental organizations. Summer day camps, for example, were often among the first programs started by parents' associations, and leisure time programs continue to be an ARC concern. In the last decade this has been shared by the Youth ARC organizations across the country, and to some extent also by the participants in the citizen advocacy movement. Since the 1960s the Joseph P Kennedy, Jr. Foundation has sponsored the Special Olympics for retarded children and adults, involving local, state, regional, national and now international competition. A new program of the Foundation is "Families Play Together." Scouting (and Camp Fire) have included retarded youth, both in integrated as well as separate troups (as in residential institutions). Increasingly, recreation facilities serving the general public are open to retarded people (bowling, swimming, public playground activities).

Research - The U.S.A. invests more money and talent than any other country in mental retardation research as well as in demonstration projects in rehabilitation and preventive action, in education and welfare. Countless colleges and universities as well as agencies and institutions participate in such research efforts. The U.S.Department of Health, Education and Welfare sponsors an extensive program through its various units, for example: the Mental Retardation Branch in the National Institute of Child Health and Human Development annually spends a large part of its budget in support of retardation research; the National Institute of Neurological Diseases and Stroke supports critically important research in mental retardation. The National INstitute of Education and the Disision of Research in the Bureau for Education of the Handicapped sponsor educational research relating directly and indirectly to mental retardation. Research is sponsored by the various units within the Rehabilitation Services Administration and the Administration for Children, Youth and Families, both in the Office of Human Development Services of H.E.W.

Personnel training- Over 500 colleges and universities offer specialized programs leading to undergraduate and graduate degrees in the education of the handicapped. These training programs are assisted by the Office of Education's Bureau of Education of the Handicapped. Related programs in all aspects of rehabilitation operate in numerous colleges and universities. Traditionally there has beena minimum of training for direct care staff in institutions, however; some community colleges are now beginning to offer courses but such training is still primarily "in-service." Innovative training programs with an interdisciplinary focus are offered through the University Affiliated Facilities for the Mentally Retarded, bringing together the disciplines of medicine, education, psychology, social work and others, to train skilled mental retardation practitioners.

Planning - A major, nationwide mental retardation planning effort occured in 1963 as a result of federal legislation. It resulted in comprehensive statewide planning which was interdisciplinary and included citizen/consumer participation. These comprehensive plans, published in 1965-1967, developed for the first time a strategy, state by state, for improved delivery of services to persons with mental retardation. In many states this has led to an ongoing planning effort. On the federal level, the President's Committee on Mental Retardation is a major source for planning and coordination.

With the enactment in 1970 of the Developmental Disabilities legislation, another planning effort on the state level was established in the state Developmental Disabilities Council and its "administrative agency."

The National Association for Retarded Citizens and its state and local members have consistently played an important role in planning improvement and extension of services, personnel training, and preventive effort.

A new service category: Developmental Disabilities - Concern over the fact that federal appropriations did not keep pace with increasing service demands and increasing costs, as well as concern over the "splintering" of services, led in 1970 to federal legislation introducing a new service category "Developmental Disabilities" (often abbreviated as D.D.). At first it included mental retardation, cerebral palsy and epilepsy, to which autism was later added. It was hopedthat introducing the broader category of Developmental Disabilities would lead to more effective utilization of funding resources and to fewer gaps in service delivery. As this report is being published, the U.S. Congress is discussing quite contradictory bills which will either extend or sharply limit the practical application of this new service concept, which has in fact not been readily accepted in some of the states.

Standards, monitoring, accreditation - Wide dissatisfaction with the poor quality particularly of residential services in institutions has led to the establishment of elaborate mechanisms of standards and systems of monitoring. Several national organizations joined together to establish the Accreditation Council for Facilities for the Mentally Retarded and Other Developmentally Disabled Persons, a non-governmental agency. It has published in 1978 Standards for Services for Developmentally Disabled Individuals, (both residential and community based, and relating firmly to the normalization principle); the address is 875 North Michigan Avenue, Chicago, Illinois 60611.

Where federal funds are utilized, the federal government requires compliance with very detailed and demanding standards issued by the Secretary of Health, Education and Welfare under legislative authority.

INFORMATION FOR VISITORS

Information in planning visits may be requested from:

The President's Committee on
Mental Retardation
Washington, D.C. 20201

National Association for
Retarded Citizens
2709 Avenue E East
Arlington, Texas 76011

School holidays: Winter - approximately December 15 - January 5
Spring - usually before and or after Easter Week
Summer - Approximately June through August

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URUGUAY

Area - 72,172 sq. miles, the smallest of the South American republics; population - 3 million, almost wholly of European descent. The language and cultural backgrounds are Spanish, although much of the population is of Italian origin. The metropolitan area of the capital, Montevideo, has about 1.3 million people. More than 1/3 of the nation's workers are employed by the government. Uruguay has been an independent nation since 1825. In 1973, the bicameral legislature was replaced with an appointed Council of State and Presidency controlled by the military, following several years of terrorist activity and increasing economic decline.

Although Uruguay's standard of living has been one of the highest in South America, the economic crisis of the last decade has brought currency devaluation and huge trade deficits. Most of the rich agricultural land is used for livestock raising and productivity has not kept pace with rising wages and social welfare legislation demands. However, the country is in the process of developing new industries.

Education, including college, is free and primary education is compulsory; the literacy rate is 95%. Uruguay has one of the world's most extensive social welfare programs, with old age, retirement and disability pensions and extensive child welfare services. The birthrate and rate of infant mortality are among the lowest in the world.

Montevideo is the seat of the Instituto Interamericano del Niño, an agency of the Organization of American States, composed of the majority of countries in North, Central and South America. In 1965 it established a Sección Retardo Mental of which Profesora Eloísa García Etchegoyhen de Lorenzo is the chief (see section on international organizations). The Sección has been expanded to include all special education problems.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ministerio de Educación y Cultura Sarandí 450, Montevideo	Ministry of Education and Culture
Consejo Nacional de Educación - CONAE Soriano 1045, Montevideo	National Council for Education
Consejo Nacional de Educatión Primaria Bartolomé Mitre 1317, Montevideo	National Council for Primary Education
Departmento de Educación Especial Bartolomé Mitre 1317, Montevideo	Dept. of Special Education
Centro de Orientación y Diagnostico de Educación Primaria San José 822, Montevideo	Center for Orientation and Diagnosis for Primary Education

Ministerio de Salud Pública 18 de Julio 1892, Montevideo	Ministry of Public Health
Clínica de Diagnóstico del Hospital de Niños "Dr. Pedro Visca" Gónzalo Ramírez 1926, Montevideo	Diagnostic Clinic of the Children's Hospital "Dr. Pedro Visca"

Other

Consejo del Niño 25 de Mayo 520, Montevideo	Children's Council

The Council is charged with basic responsibility in safeguarding the health and welfare of mothers and young children.

Consejo Nacional de Asignaciones Familiares San José 1132, Montevideo	Central Council for Family Allowances

National planning and coordinating agencies

Comisión Nacional de Rehabilitación	National Commission on Rehabilitation

An unofficial advisory body appointed by the Ministers of Culture, Public Health and Social Welfare in 1968.

Centro Nacional de Rehabilitación Psíquica Cubo del Norte 3717, Montevideo	National Center for Mental Rehabilitation (in coordination with the Ministry of Public Health)

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation
Professional

Asociación Uruguaya para el Estudio Científico de la Deficiencia Mental Joaquín Suarez 3281, Montevideo	Uruguayan Association for the Scientific Study of Mental Deficiency

The Associatiòn was founded in 1967 and is a member of the International Association for the Scientific Study of Mental Deficiency.

Citizen

Asociación Nacional pro Niño Retardado Mental (ANR) Millán 4290, Montevideo	National Association for Retarded Children

Founded in 1961, the ANR's membership consists of parents of the mentally retarded, interested citizens and professional workers. It joined the International League of Societies for the Mentally Handicapped in 1964.

Research

Hospital de Clínicas "Dr. Manuel Quintela"
Centro Latinoamericano de Perinatología - CLAP
Ave. Italia s/n, Montevideo

Servicio Prescolar - Escuela de Recuperación Psíquica
No. 203
19 de Abril 1110, Montevideo

Instituto Magisterial Superior
Cátedra de Investigación
Cuareim 1381, Montevideo

Publications

Boletín de la Sociedad Uruguaya de Pediatría

Boletín de la Sociedad Uruguaya de Neurología

Boletín del Instituto Interamericano del Niño

Directories

The statistical section of the Council for Primary Education periodically publishes directories listing special schools and classes.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Specialized diagnostic work is carried out in the Children's Hospital (Hospital de Niños "Dr. Pedro Visca") and the University Hospital (Hospital de Clínicas "Dr. Manuel Quintela"). The special school for mentally retarded children, Escuela de Recuperación Psíquica No. 1 (now No. 203) provides a parent counseling service and assessment clinic for infants and preschool children as well as for school age children. A unique feature of this clinic is a home visitation and advisory service by a teacher with training in early child development.

Assessment and testing of school age children is the responsibility of the medical and psychological services of the Consejo Nacional de Enseñanza Primaria y Normal.

Education - Forty-four elementary schools in Montevideo and 173 in the provinces in 1976 had ungraded classes for borderline or slow learning children (Clases de Recuperación Pedagógica). In Montevideo there were 19 special schools for mentally retarded children (Escuelas de Recuperación Psíquica), and in the other 18 Departamentos (provinces) there were an additional 85 special schools. Many of these special schools accept children of moderate and even severe retardation, although the majority are the mildly retarded. A limited number of multihandicapped retarded children are accepted in schools for children with other specific disabilities. Because the public school system in Uruguay began to accept mentally retarded children as early as the 1930's, relatively few private schools have developed. A recent exception is the day school program for very severely handicapped children run by the parents' association ANR.

Work training and employment - There is emphasis in the special schools on preparation for work, following the pioneering example of Mrs. Eloisa G.E. de Lorenzo, Director of the Escuela de Recuperación Psíquica No. 203. Both schools 203 and 205 have pre-vocational training in regular classes and specific work training for older pupils and young adults. The staff is responsible also for social training, community job placement and follow-up. These two schools also have sheltered workshops for severely handicapped adults. Also a part of the public school system is the vocational training program of ETRO - Escuela Taller de Recuperación Occupational (Calle Yaguáron 1075, Montevideo) for the mildly retarded.

Residential services- are limited. "Obra Morquio No. 205", one of the special public schools in Montevideo (Chapicuy 3756), which was started in 1947 as a private school, maintains a boarding home for a limited number of children. Other residential facilities for dependent children, including some retarded children, are the Colonia Echepare in Santa Lucia, under the auspices of the Consejo del Niño, and the Don Orione Home, a private charity in a suburb of Montevideo. Also privately maintained by SARU (Servicio de Ayuda Rural del Uruguay) is a home for girls and women in Colón, "Hogar Margarita Uriate de Herrera," staffed by Spanish nuns. An undetermined number of severely retarded children and adults are under care in the state mental institution, Hospital Vilardebo.

Recreation - Escuela de Recuperación Psíquica No. 203 has pioneered in providing summer camping for all but its youngest (preschool) classes.

Research - A multidisciplinary cooperative investigation on the identification and development of high risk infants has been undertaken by the Departments of Neurology, Obstetrics and Pediatrics of the Hospital de Clínicas (University Hospital) and the Escuela de Recuperación Psiquica No. 203. This has led to the establishment of CLAP, the Latin American Perinatology and Human Development Center, sponsored by the Pan American Health Organization (WHO) in cooperation with the University and the Ministry of Public Health. The Center is concerned both with research and interdisciplinary training programs.

In the field of education, the National Board of Education set up in 1967 CIDERM, a center for investigation, diagnosis and education techniques for mentally retarded children, one of whose areas is to translate behavioral research into feasible classroom techniques.*

Personnel training - Two-year courses in special education are available for qualified teachers with two years of general teaching experience.

* See chapter on Uruguay in "The Present Situation and Trends of Research in the Field of Special Education," UNESCO, 1973.

Special education teachers are granted a higher level of salary. Practicum courses are provided in the special schools. Consideration to the subject of mental retardation is given both by the School of Nursing and by the two schools of social work, as well as at the above mentioned CLAP.

Planning and coordination - The Comisión Nacional de Rehabilitación, appointed in 1968, specifically includes both the physically and mentally disabled and is charged with wide responsibilities in fact finding, coordination, promotion and planning. The activities in mental retardation of the Instituto Interamericano del Niño have been of considerable influence in Uruguay.

OTHER INFORMATION FOR VISITORS

Requests for information and visits can be directed to the

Consejo Nacional de Educación Primaria
Bartolomé Mitre 1317
Montevideo

Asociación Nacional pro Niño Retardado Mental (ANR)
Millán 4290, Montevideo

School holiday periods - The summer vacation period is from December to approximately March 10. There is a two-week winter holiday during July.

VENEZUELA

Venezuela is a democratic South American Republic on the Caribbean coast with an area of approximately 400,000 sq. miles. Venezuelans are predominantly of mixed ancestry: European, Indian and African. The population is about 12.3 million; the greater metropolitan area of Caracas has a population of at least 2 million, and Maracaibo, the second largest city, nearly 1 million people.

The official language is Spanish, although there are many newer arrivals who speak Italian, English, Portuguese, French and Japanese. Roman Catholicism is the official religion; freedom of worship is fully guaranteed and Jewish, Moslem and Protestant congregations of almost all denominations are present.

The governmental structure is similar to that of the U.S.A. with a strong executive branch and a bicameral congress elected for a 5-year period. Suffrage is extended to both men and women over 18 years of age and voting is mandatory for all citizens.

Petroleum is the basic item of Venezuela's economy and its chief export. It is followed by iron ore and certain agricultural products. Within the last decade, Venezuela has increased its consumer industries. As a member of OPEP, Venezuela has contributed to the new policies being established in the Latin American Market of exported goods.

Education is compulsory until the age of 14, but in reality only about 60% attend primary school. Secondary and technical schools and universities are maintained by the government and are free. A parallel private educational system exists, which is closely regulated by the government.

GOVERNMENT AGENCIES WITH DEFINITE RESPONSIBILITY FOR MENTAL RETARDATION

Ministries

Ministerio de Educación	Ministry of Education
Dirección de Educación Especial Quinta Guaranao, Av. Las Acacias La Florida, Caracas	Department of Special Education
Ministerio de Sanidad y Asistencia Social	Ministry of Health and Social Assistance
Departamento de Higiene Mental, Edificio Sur, Centro Simón Bolívar Caracas	Department of Mental Health

Planning

Comisión Permanente para la atención del Retardo Mental Av. Andres Bello Torre Oeste. Ofic. 92, Caracas	Presidential Commission

By Presidential decree, this permanent planning commission was created in 1975, headed by Dr. Gustavo Leal, for the care and attention of the mentally retarded. The commission has representatives from the different governmental and private agencies and is responsible for the planning, coordination and supervision of the work on mental retardation in Venezuela.

Other official agencies with mental retardation responsibilities

Instituto Nacional de Psiquiatria Infantil (INAPSI) Av. Las Acacias, No. 65 La Florida, Caracas	National Institute of Child Psychiatry
Consejo Venezolano del Niño Edificio J. Beneficiencia San Martin, Caracas	Venezuelan Children's Council
Sección de Neurología, Departamento de Pediatría Hospital Clínico Universidad Central de Venezuela Ciudad Universitaria, Caracas	Neurological Section, Department of Pediatrics Clinical Hospital Central University of Venezuela

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation
Professional

Asociación Venezolana para el Estudio Científico de la Deficiencia Mental
(Venezuelan Association for the Scientific Study of Mental Deficiency)
c/o INAPSI
Av. Las Acacias, No. 65
La Florida, Caracas

Member of the International Association for the Scientific Study of Mental Deficiency

Citizen

Asociación Venezolana de Padres y Amigos de Niños Excepcionales - AVEPANE
(Venezuelan Association of Parents and Friends of Exceptional Children)
6a Transversal de Altamira, No. 21-27, Caracas

Founded in 1963, the Association provides programs for children and families in Caracas. Beginning with a day school for mildly retarded children, and later a school for moderately retarded children, through AVESTRELLA (Asociación de Padres y Amigos de Niños con Retardo Mental Moderato), vocational training and a sheltered workshop is now available. AVEPANE has convened several national conferences and has brought in consultants from abroad. Similarly, parents' and friends' Associations have been organized in several other Venezuelan cities, for example:

Asociación Zuliana de Padres y Amigos de Niños Excepcionales - AZUPANE
(Zulia State Association of Parents and Friends of Exceptional Children)
Avenida 2 F No. 65-60, Aptdo. 1802, Colonia Creole
Maracaibo, Estado Zulia (Founded in 1968)

There are active Associations in 7 additional states: Bolivar, Carabobo, Falcon, Merida, Miranda, Monagas and Tachira.

Other national voluntary organizations which include mental retardation

Liga Venezolana de Higiene Mental Av. Olimpo. No. 56 San Antonio, Caracas	Venezuelan League of Mental Health
Asociación Venezolana para la Educación Especial Apartado 59045 Caracas	Venezuelan Association of Special Education Teachers
Asociación Nacional de Paralysis Cerebral - ANAPACE Terrazas de Santa Monica Av. Simón Planas y Gil Fortoul Caracas	National Association for Cerebral Palsy
Federación de Instituciones Privadas de Asistencia al Niño - FIPAN	Federation of Private Child Welfare Institutions
Instituto Venezolano para el Desarrollo Integral del Niño - INVEDIN 5 Ave. de los Palos Grandes Qta. Sta. Bárbara Caracas	Venezuelan Institute for Child Development

PUBLICATIONS

AVEPANE has made available extensive informational publications and conference proceedings. INAPSI publishes a bulletin, "Niños".

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - As yet limited services are available for parents of very young children. Regional diagnostic centers, recently created by the Department of Special Education, provide diagnosis, orientation and parent guidance, which is also one of the main concerns of the various parent associations throughout the country. Traditionally, mental health centers carried out certain diagnostic functions as did the neurological pediatric services in the university hospitals. INVEDIN has been especially interested in problems of early stimulation and work with parents.

Education - Educational services for retarded children were first provided only by private groups. By 1974, there were about 25 privately owned special schools and 33 under various government auspices, serving a very small percentage of the total number of children needing special education. A problem in Venezuela, as in many countries, is the differentiation between children who are mentally retarded and children who are functioning as retarded because of social and economic deprivation.

Work training and employment - Since 1969, AVEPANE has been operating a vocational training and sheltered workshop program "Talleres Aveluz Dr. Alberto Mateo Alonso."

Residential services - The Department of Mental Health has a psychiatric hospital called Bárbula in the State of Carabobo, among whose patients are an undetermined number of mentally retarded persons. Some of the private schools also have limited residential facilities.

Financial assistance - Children of school age whose parents are insured under the social security system, benefit from a limited assistance. Private associations offer scholarships for treatment, education and vocational training, obtained through donations.

Personnel training - Specialized training programs, primarily for teachers and psychologists, are carried out by AVEPANE, INAPSI, and by the Instituto de Majoramiento del Magisterio (Teachers' College), depending on the Ministry of Education. In cooperation with some North American universities, AVEPANE is planning to undertake more extensive training programs.

OTHER INFORMATION FOR VISITORS

Official visitors sent by foreign governments may have their visits arranged through the Ministry of Foreign Relations and the Ministry of Education.

Official visitors from non-governmental associations will be welcomed by AVEPANE, which can set up a program and coordinate their stay in Venezuela. This could also be done by the other associations.

School holidays - from the middle of July through the middle of September; Christmas, Holy Week.

YUGOSLAVIA

Area - 98,766 square miles; population 22 million. The Socialist Federal Republic of Yugoslavia (SFRJ) comprises the six republics of Bosnia and Herzegovina, Croatia, Macedonia, Montenegro, Slovenia and Serbia,with two autonomous provinces, Kosovo and Vojvodina. It is governed by the Federal Assembly, which elects the President of the Republic and the Federal Executive Council. Belgrade is the capital.

There are three different language groups, Serbo-Croatian, Macedonian and Slovenian, as well as the languages of the national minorities groups, two alphabets, Latin and Cyrillic, and three religions, Orthodox, Catholic and Moslem.

Economically Yugoslavia is in an era of intensive industrialization and urbanisation.

School attendance is compulsory from age 7 to 15. The educational system is regulated by the education laws of the Republic (or province), carried out on both levels by the Republican (or provincial) and local educational councils, services and "self-governing interest groups." (These groups are a basic form of citizen involvement and may be a professional community, as a university, a trade group, as a bakers' association, or a school including everyone from director to janitor.)

A 1974 constitutional reform established self-governing interest communities in the field of human services, on all levels responsible for planning and financing programs in health, education, welfare, social security, employment and other areas, including rehabilitation of the handicapped.

There are no separate administrative authorities for the care of mentally retarded individuals; this is part of general rehabilitation and welfare for the handicapped which in turn is an integral part of services for all citizens.

GOVERNMENT AGENCIES RESPONSIBLE FOR MENTAL RETARDATION

Federal

Federal Committee for Health and Social Welfare,
SIV II, Beograd

Federal Committee for Education and Culture
SIV II, Beograd

Yugoslav Institute for Education
Draže Pavlovića 13, Beograd

Yugoslav Institute for Health Protection
K. Penezića 35, Beograd

Republican and provincial

Secretariat (Ministry) for Health and Social Welfare
Secretariat for Education and Culture
Secretariat for Labor

Institute for Education
Institute for Social Work
Institute for Health

In the Communes: (municipalities, or local government authorities)

Institute for Social Work
Section for Health
Section for Education and Culture
Section for Labor

VOLUNTARY ORGANISATIONS

With primary concern in mental retardation

Citizen and Professional

Savjet organizacija za pomoć mentalno retardiranim u SFRJ Prilaz JNA 43/3, Zagreb	Council of Organisations for Aid to Mentally Retarded Persons in SFRJ

Republican associations for the mentally retarded (6)
Provincial associations for the mentally retarded (2)
Communal (and intercommunal) societies for the mentally retarded (198)

These associations have a total membership of 60,000, half of whom are parents and relatives, half professional and other voluntary persons. The main tasks are to help in detection, in consultation of parents, in establishing services and facilities for schooling, vocational rehabilitation and employment, as well as residential or family places for the severely and profoundly retarded. All associations have their committees elected by the membership. Parents play a dominant role. Cooperative relationships with various professions are maintained through everyday work, seminars, and conferences of the associations. Delegates are included in the facilities, services and other organisations providing any kind of care for the retarded. The Council holds membership in the ILSMH and the IASSMD.

Others which include mental retardation

Savez društava defektologa Jugoslavije Kosovska 8, Beograd	Association of Defectologists
Savez lekarskih društava Jugoslavije Narodnog fronta 1, Beograd	Association of Physicians

Savez društave socijalnih radnika Jugoslavije Nemanjina 34, Beograd	Association of Social Workers
Društvo i vaspitanje - Savjet organizacija i ustanova za vaspitanje djece Jugoslavije Mose Pijade 12, Beograd	"Society and Education," Council of Organizations and Institutions for the Education of Children in Yugoslavia
Crveni krst Jugoslavije Simina 19, Beograd	Red Cross associations
Koordinacioni odbor saveznih organizacija invalida Kosovska 8, Beograd	Coordinating federation for the handicapped

All are organized on Republic (or province) and local level as well as Federal.

RESEARCH

Defektološki fakultet Sveučilišta u Zagrebu Kušlanova 59a, Zagreb	Faculty for Defectology, the University of Zagreb
Defektološki fakultet Univerziteta u Beogradu Visokog Stevana 2, Beograd	Faculty for Defectology, the University of Beograd
Zavod za mentalno zdraulje Palmotićeve 37, Beograd	Institute for Mental Health
Centar za mentalnu retardaciju Ilica 113, Zagreb	Institute for Mental Retardation

Research in mental retardation is also carried out in the medical clinics (genetics, epidemiology), institutes for social work, homes for retarded, special schools (education), etc.

PUBLICATIONS

Pregled problema mentalno retardiranih u SFRJ JNA 43/3, Zagreb	Survey of Problems of the Mentally Retarded (journal of the Council of Organizations for the Mentally Retarded)
Naš zbornik Samova 9, Ljubljana	Our Magazine (in Slovenian)
Naš prijatelj JNA 43/3, Zagreb	Our Friend (for Croatia)
Poraka Topansko polje, Skopje	The Message (in Macedonian)
Defektologija Kušlanova 59a, Zagreb	Defectology (Special Education)
Specijalna škola Kosovska 8, Beograd	Special School
Rehabilitacija Sokobanjska, Beograd	Rehabilitation

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis, consultation to parents - Detection and diagnosis at birth are made by maternity clinics, later on by childrens' clinics, pediatric dispensaries and other health services. Observation and assessment of handicapped children is provided through expert teams in the communes (physician, psychologist, defectologist, social-worker, therapists). On the basis of the team assessment, registration is done by the institute of social work. Thereafter, the handicapped child has a right to all appropriate rehabilitation services, including specialist and/or institutional care. In health institutions, some big cities have introduced systems for high-risk children. Preventive measures are undertaken through health and social security services.

Education - Education of mildly and moderately retarded children is free and compulsory (for communes and parents) from 7 to 17. There are about 100 local special day schools, 20 residential schools (for country children) and more than 400 special classes in regular primary schools, with a total of 22,000 children. Borderline cases are directed to the regular schools. Many cities also have kindergarten and other preschool facilities which include retarded children from 3 to 7 years. In some regions, there are sections for moderately and severely retarded children in the special schools and homes, and some retarded children are placed in foster families. There are outpatient clinics for corrective gymnastics, logopedagogy and other consultation when necessary. More and more defectologists and therapists are employed in the regular schools and socio-medical facilities. Very great emphasis is provided in the present education reforms on integrating retarded and other handicapped children into the community as much as possible. This includes information and education for parents through the various societies and special schools.

Work training and employment - Vocational training for mildly (and some moderately) retarded youth is provided in different jobs in the open industry, trade and agriculture. At the same time academic training is continued in the special schools and classes. After 8 years of elementary school and 3 years of vocational training, retarded young people receive a certification as skilled or semi-skilled workers. There are no difficulties to employ them then in their own cities, with the help of placement agencies, social security offices and societies for the retarded. Some thousands of successful workers up to now are certified and placed in jobs, with as full rights as other workers. Moderately retarded young people are trained mostly in sheltered workshops with other handicapped and non-handicapped people (80 workshops in SFRJ) and sheltered divisions of the factories (40). The majority are able to leave to be employed after training. Some residential homes have workshops and farms for the moderately and severely retarded, but it is difficult to find them jobs. All handicapped workers enjoy the same rights as other workers on the job and special protection when necessary.

Medical services - are provided through regular health institutions, consultation centers, dispensaries and hospitals. All medical care for children and youth is free. More than 80% of the population is under a health insurance system that pays medical costs for employed persons and their families. Other persons are covered by communal financial assistance. All medical services are socialized and the number is growing fast, as is training of medical staff.

Residential care - is provided only for those moderately, severely and profoundly retarded persons who cannot live at home, due to health or other causes. There are 30 residential homes with about 5,600 residents throughout the country. Most have farms and workshops, some in cooperation with local industry. Some residential homes serve a mixed clientele of middle and severe level persons, others, only severely and profoundly retarded persons. Day-care centers have been opened in some big cities for children (under IQ 50) who will go on for training in sheltered workshops. There is a trend to move as many persons as possible from residential homes to open or semi-open facilities.

Financial assistance - is provided through health funds, child welfare funds, and educational funds. Parents participate in residential costs for their children if they are wealthy. Social security funds cover all vocational training, residential or foster homes costs for handicapped children of employed parents. Parents of lower incomes receive separate financial assistance for all their children; the assistance is 50% higher for a handicapped child.

Recreation - is provided under the same conditions as for others. Special schools and residential homes organise group recreation at the sea or mountains; associations for the retarded sponsor seminars for parents and their children at the Adriatic coast or other recreational centers.

Personnel training - Educational personnel is trained in the Faculties for Defectology (Zagreb and Beograd) or College for Special Education (Ljubljana). More than 5,000 defectologists are qualified and employed in the special and regular facilities. Social workers are trained in High-schools for social work (Zagreb and Beograd) or social work schools (Ljubljana, Sarajevo and Skopje). Medical, psychological and other rehabilitation staff are trained under regular conditions, with in-service practice.

Legislation - on the federal level regulates basic rights in the 1974 Constitution and special protection of these rights. In this Constitution as well as in those of the republics and provinces the right of the handicapped to vocational rehabilitation and employment is specified. The Federal Social Security Act covers rights of injured, disabled, and handicapped children of employed parents. All other legislation on health, child and social welfare, education, training, social security, employment, etc. is decentralized to the republics and provinces, and from them to the communes. In recent years the self-governing interest communities have been developing their regulations, including new rights in the rehabilitation and welfare system.

Planning and coordination - are provided on all levels through cooperation of the responsible bodies, services, facilities and personnel. Every 5 years development programs are discussed by the citizens, primarily in the institutions and workshop establishments, and forwarded from local to federal level. Societies for the retarded propose necessary services and institutions. In some regions the associations for the handicapped provide for coordination of common goals for all disabled persons. The socialistic planning on all levels gives the possibility to parents and other citizens to suggest necessary facilities, rights, etc. through local communities, business enterprises and other self-governing bodies. From its first society for the retarded (1957, in Zagreb), and particularly after founding the federal association (1963) the voluntary movement has supported a dynamic and broad development of different services and facilities for persons with mental retardation.

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INFORMATION FOR VISITORS

Requests for information or assistance in arranging professional visits can be made to the Savjet organizacije za pomoć mentalno retardiranim osobama u SFRJ, Prilaz JNA 43/3, Zagreb. Requests should be sent at least 2 months in advance with precise information on the visitor, professional background, particular interests and length of time available for the visit. Request should preferably be sent from an official body or organization.

School holidays - are from June 10 to September 10, and January 15 to February 15

TIPS FOR TRAVELERS

Suggestions on Planning Trips to Other Countries

With the tremendous increase in international travel, many institutions and agencies have become severely burdened by the large number of visitors from abroad. Stop and think for a moment what it means for a residential center, such as Vangede in Copenhagen, to have several thousand visitors in one year. Many hours of valuable staff time are involved in receiving these visitors. You will quickly see that it is not only your obligation towards your prospective host but also in your own interest to prepare your trip carefully so that your visit will receive appropriate attention. Here are a few suggestions:

1. Prepare a one page statement which gives your own professional background, your present activities, including your full title, the name of the agency or organization with which you are affiliated, and your full address. Outline briefly the particular program areas in which you are interested; indicate also whether you would like to meet particular staff members.

2. Enclose this statement in your correspondence preparatory to your trip and carry enough copies with you so that you can leave one with the person who receives you at each of the programs you visit. Furnishing this kind of information will assure your prospective host that your interest is genuine and warrants his attention. It also will help him to plan your time most effectively and to involve those of his staff who are best able to assist you, or who may be best able to act as interpretor for you.

3. Be as specific as possible regarding the length of time you will have available for your visit.

4. Frequently the traveler tries to crowd too much into his schedule. Be sure to give yourself time to absorb and to keep a record of what you have seen. Allow adequate time for your local travel arrangements so that your host is not kept waiting. One easily forgets how much one can get slowed down in finding one's way in unaccustomed surroundings.

5. Usually people do not object to having pictures taken, if it does not disrupt the ongoing activity of a class or group.

6. 'Thank you' letters are of course always appreciated, as well as copies of reports you may make on your return.

BON VOYAGE!

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